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| **Paul Coverdell National Acute Stroke Registry Quarterly Performance Measure Results** | | |
|  |  |  |
| **Number of Hospitals:** |  |  |
|  |  |  |
| **Demographic** | **N\*** | **Percent\*** |
| **Age** |  |  |
| 18-34 |  |  |
| 35-44 |  |  |
| 45-54 |  |  |
| 55-64 |  |  |
| 65-74 |  |  |
| 75-84 |  |  |
| 85+ |  |  |
| **Race** |  |  |
| Non-Hispanic White |  |  |
| Non-Hispanic Black |  |  |
| Hispanic |  |  |
| Other |  |  |
| Unknown |  |  |
| **Gender** |  |  |
| Missing |  |  |
| Male |  |  |
| Female |  |  |
|  |  |  |
|  |  |  |
| **Arrival Mode** | **N\*** | **Percent\*** |
| EMS |  |  |
| Private Auto |  |  |
| Transfer From Another Hospital |  |  |
| ND/Unknown |  |  |
|  |  |  |
| **Type** | **N\*** | **Percent\*** |
| Ischemic |  |  |
| ICH |  |  |
| SAH |  |  |
| TIA |  |  |
| Ill-Defined (SNS) |  |  |
| No stroke |  |  |
| Missing |  |  |
|  |  |  |
| **Alteplase (tPA)** | **N\*** | **Percent\*** |
| All IS Patients receiving any tPA |  |  |
| All IS tPA patients having symptomatic ICH complications |  |  |
| All IS tPA patients having life threatening complications |  |  |
| Door to needle time <=45 minutes |  |  |
| Mean Door to Needle Time (hours) |  |  |
| Median Door to Needle Time (hours) |  |  |
| Mean LKW to Needle Time (hours) |  |  |
| Median LKW to Needle Time (hours) |  |  |

|  |  |  |
| --- | --- | --- |
| **TIA only & SNS only** | **N\*** | **Percent\*** |
| TIA Patients who received any tPA |  |  |
| SNS Patients who received any tPA |  |  |

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| **Coverdell In-Hospital Performance Measures Numerator\*** | | | | **Denominator\*** | **Percent\*** | **HS/SNS** | **IS** | **TIA** |  |  |
| Alteplase (tPA) Given | | |  |  |  |  | X |  |  |  |
| Dysphagia Screening | | |  |  |  | X | X |  |  |  |
| VTE/DVT Prophylaxis by end of Day 2 | | |  |  |  | X | X |  |  |  |
| Antithrombotic Therapy by end of Day 2 | | |  |  |  |  | X | X |  |  |
| Assessed for Rehabilitation | | |  |  |  | X | X |  |  |  |
| Stroke Education | | |  |  |  | X | X | X |  |  |
| Smoking Cessation Counseling | | |  |  |  | X | X | X |  |  |
| Antithrombotic Therapy at Discharge | | |  |  |  |  | X | X |  |  |
| Statin Therapy at Discharge | | |  |  |  |  | X | X |  |  |
| Anticoagulation for Atrial Fibrillation | | |  |  |  |  | X | X |  |  |
| Doo to needle (IV tPA) time in 60 minutes | | |  |  |  |  | X |  |  |  |
| NIH stroke scale score recorded | | |  |  |  |  | X |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Ischemic Stroke Only** |  |  | **Numerator\*** | **Denominator\*** | **Percent\*** | **White\*** | **Race Other\*** | **Male\*** | **Female\*** |  |
| Alteplase (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 | | |  |  |  |  |  |  |  |  |
| Door to needle (IV tPA) time in 60 minutes | | |  |  |  |  |  |  |  |  |
| NIH stroke scale score recorded | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **TIA Only** |  |  | **Numerator\*** | **Denominator\*** | **Percent\*** | **White\*** | **Race 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 | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Hemorrhagic Stroke Only** | |  | **Numerator\*** | **Denominator\*** | **Percent\*** | **White\*** | **Race Other\*** | **Male\*** | **Female\*** |  |
| Dysphagia Screening | | |  |  |  |  |  |  |  |  |
| VTE 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 |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Data source: , All are weighted estimated** |  |  |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |
| **Centers for Disease Control and Prevention - Division for Heart Disease and Stroke Prevention** | | | | | | | | | |  |

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| **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:**  **Centers for Disease Control and Prevention - Division for Heart Disease and Stroke Prevention** |  |