

AtlantiCare Regional Medical Center Comprehensive Stroke Center Quality Measures and Outcomes Report

AtlantiCare is both state-designated and nationally accredited in Stroke Care.

AtlantiCare Regional Medical Center's (ARMC) Atlantic City Campus has earned the Joint Commission's Certificate of Distinction for Primary Stroke Centers, a national accreditation for providing advanced stroke treatment in compliance with American Stroke Association designated guidelines that meet strict performance and quality criteria.

Our experienced team diagnoses, prevents and treats stroke with clot-busting medications and advanced minimally invasive technology. We continually focus on decreasing time to treatment for stroke patients, as improving access to emergency medical treatments of stroke improves patient outcomes and saves viable brain tissue.

Our biplane angiography suite allows the team to see detailed images of the brain and perform minimally invasive emergency treatments for stroke.

The table below, "2016 Outcomes Report", outlines volume and outcome requirements set forth by the Joint Commission for Comprehensive Stroke Centers and how AtlantiCare performed in 2016

| <i>2016 Outcomes Report*</i> | <u>Comprehensive Stroke Center Requirements</u> | <u>AtlantiCare Regional Medical Center 2016</u> |
|---|--|--|
| Patients with diagnosis of subarachnoid hemorrhage | 20 | 22 |
| Surgical Clippings and Endovascular Coiling for treatment of aneurysms | 15 | 29 |
| Administration of IV- tPA for emergency treatment of stroke | 25 | 75 |
| Complications with 24 hours following Diagnostic Angiogram | < 1% | 0.74% |
| Complications within 30 days following Asymptomatic Carotid Endarterectomy and Carotid Stenting | < 3% | 0%** |
| Complications within 30 days following Symptomatic Carotid Endarterectomy and Carotid Stenting | < 6% | 0%** |

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Key Stroke Quality Metrics and Indicators 2016*







| Stroke Core Measure Set | Goal** | AtlantiCare** |
|---|--------|---------------|
| The goal of stroke care is to rapidly evaluate patients for eligibility for a clot busting medication, IV-tPA. This medication helps to restore function to affected brain tissue that is being damaged by a blood clot. The American Stroke Association recommends aiming to administer the medication to eligible patients within 60 minutes of arrival to a stroke center. | 75% | 83% |
| Stroke patients are at higher risk for developing deep vein blood clots. Preventive therapies should be administered within 2 days of symptom onset. | 100% | 100% |
| An antithrombotic agent is a drug that reduces the formation of blood clots. Studies suggest that antithrombotic therapy should be prescribed at hospital discharge following an ischemic stroke to reduce morbidity and mortality. | 100% | 100% |
| Anticoagulation therapy is a course of drug therapy in which medications are administered to a patient to slow the rate at which the patient's blood clots. The administration of anticoagulation therapy is an effective strategy in preventing recurrent stroke in high risk-atrial fibrillation patients. | 100% | 98% |
| Percent of acute ischemic stroke patients receiving IV-tPA during the hospital stay who received the medication within 180 minutes of arrival. | 100% | 96% |
| An antithrombotic is a medication that prevents blood clots. Antithrombotic medication should be administered within 2 days of symptoms onset in acute ischemic stroke patients to reduce morbidity and mortality. | 100% | 100% |
| Statin drugs are medication used to reduce serum level of lipids such as cholesterol. The reduction of LDL ("bad cholesterol") through lifestyle modification and drug therapy, when appropriate, is recommended for prevention of recurrent ischemic stroke, heart attack and other vascular events. | 100% | 100% |
| Percent of ischemic or hemorrhagic stroke patients or their caregivers who were given educational materials during the hospital stay addressing all of the following: activation of emergency services, signs and symptoms of stroke, risk factors related to stroke, importance of medication compliance and importance of follow-up visits. | 100% | 100% |
| Ischemic Stroke patients who were assessed for rehabilitation services. | 100% | 99% |
| Stroke Composite Score – Overall Score for Quality of Stroke Care Provided | 100% | 99% |

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Getting immediate medical care for stroke symptoms is critical. It can mean the difference between complete recovery and a lifetime of serious disability. Look for any of the following:

- Sudden severe headache with no known cause
- Sudden numbness or weakness of the face
- Slurred speech
- Sudden numbness or weakness of an arm or leg, especially on one side of the body
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking
- Dizziness
- Loss of balance
- Loss of coordination

AtlantiCare uses the BEFAST acronym to help identify stroke symptoms. If you or someone you know experiences any of the following symptoms, call 9-1-1 immediately.

| Balance | Eyes | Face | Arms | Speech | Time |
|---|---|---|---|---|---|
|  |  |  |  |  |  |
| B is for Balance | E is for Eyes | F is for Face | A is for Arms | S is for Speech | T is for Time |
| Does the person have a sudden loss of balance? | Has the person suddenly lost vision in one or both eyes? | Does the person's face look uneven when asked to smile? | Is there weakness in one or both arms? | Is the person's speech slurred? Does the person have trouble speaking or seem confused? | Call 9-1-1 now if you notice any of these signs and symptoms. |

*AtlantiCare Regional Medical Center reports to the following outcomes to meet requirements of The Joint Commission Comprehensive Stroke Center Certification

**Carotid Endarterectomy and Endovascular Stenting 30 day stroke and death rate from January 2016 to December 2016

*To learn more about Stroke Quality Measures please visit the American Stroke Associations fact sheet on stroke quality measures

** Data is from NJASR reporting through Nuance Quality Measures Database. All "Goal" values are 90th percentile reporting values from nuance database for stroke patients.