

**TIDEWATER EMERGENCY MEDICAL SERVICES COUNCIL, INC.  
EMS STROKE PERFORMANCE IMPROVEMENT COMMITTEE MINUTES**

**Meeting Date:** April 14, 2021      **Meeting Location:** Hybrid      **Chaired By:** Dr. Joel Michael      **Begin Time:** 2:30 PM      **End Time:** 3:30 PM

**Minutes By:** Valerie Vagts      **Members Present:** Alek Collins, John Baker, Alan Perry, Amy Smith-Peard, Amy Ward, Steve Henson, Dr. Michael, Pat Edwards, Mary Hay, Michael Whitehurst, Rita Meyers, Robin McAlpin, Mary Stern, Sabrina Werner, Kenneth Hudgins, Alison Teel, Valerie Vagts

Item (Project)	Discussion (Status)	Action Required	Barriers	By Whom/When
Intro / Approval of Minutes	<ul style="list-style-type: none"> <li>Δ Approved December meeting's minutes: Steve 1<sup>st</sup>, Dr. Whitehurst 2<sup>nd</sup></li> </ul>	N/A	N/A	N/A
Review Quarterly Data reports Feb/March	<ul style="list-style-type: none"> <li>Δ Mission Lifeline benchmark: pre-data review – 2023 has new parameters</li> <li>Δ EMS Stroke Alert: 258/397= 65% (72% goal) – If the hospital isn't initiating stroke alerts from the field prior to arriving at the hospital, some providers are not documenting it. Ideally we would like to use the denominator of positive stroke outcome from the hospital diagnosis by MRI and numerator would be when EMS documents the alert in their report.</li> <li>Δ EMS Stroke to Receiving Centers: 397 (100% goal)               <ul style="list-style-type: none"> <li>○ 83% in 2021</li> <li>○ Comprehensive 98, 24.7%; Primary 261, 65.7%, Acute 23, 5.8%, None 3.8% (14 refused transport)</li> </ul> </li> <li>Δ Glucose Check: 378, 95.2% (95% goal) 3.8% stayed home, 1% got glucose               <ul style="list-style-type: none"> <li>○ 93.8% in 2021</li> <li>○ Happy with glucose check %</li> </ul> </li> <li>Δ On Scene Time: 14:44 (15:40 goal); 16:40 in 2021               <ul style="list-style-type: none"> <li>○ Happy with on scene time</li> <li>○ Happy with on scene time</li> </ul> </li> </ul>	N/A	N/A	N/A
Medical Incident Review	<ul style="list-style-type: none"> <li>Δ Robin gave recap of how Sentara moved from alteplase to tenecteplase               <ul style="list-style-type: none"> <li>○ Neither are inferior to the other</li> <li>○ Go live Oct 1, 2021</li> <li>○ Genetically modified tPA that is delivered in a single bolus. Nurses are much happier helping stroke patients when they don't have to mix the drip and set up the pump, etc.</li> <li>○ IV push is able to be Door to Needle within 60 minutes</li> <li>○ Having success even when used outside the currently established time frames</li> <li>○ Give TNK, then CTA right away</li> <li>○ Only changes were the medication and administration of the meds</li> <li>○ TNK has less complications but not compatible with glucose</li> <li>○ Alteplase is approved and TNK is not, long process to get it approved</li> <li>○ Possibly could lead to thrombolysis administered in field at a later date – focus on community education</li> </ul> </li> </ul>	N/A	N/A	N/A

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BEFAST	Δ Diversion for LVO			
New Business	Δ Recommendations presented @ ISC International Stroke Conference – Pat E was having technical difficulties so unable to discuss. Dr. Michael should attend a conference before the June meeting and will report out. Dr. Baker said they talked about doing interarterial analytic after thrombolytic but needed to be researched further. Mechanical thrombolectomy improves 50% of all stroke patients Δ Updates on the Stroke Smart Virginia initiative – Kai Funk is leading this initiative will ask her to come speak as we get closer	Yes	N/A	Stroke Committee/ next meeting
Roundtable	Δ N/A	Yes	N/A	Stroke Committee/ next meeting
Next Meeting	The EMS PI Committee meeting will be hybrid on June 9, 2022 at 2:30 PM	N/A	N/A	N/A