



TeleSpecialists®

TRANSFORMATIVE TELEMEDICINE

Case Study



Medical Center in South Carolina

About Medical Center in South Carolina

This 139-bed hospital is located in a South Carolina city with an estimated population of 5,398. It ranks in the top 15% of US hospitals for quality care.

The Problem

Thrombolytic administration times were not consistent and were delayed beyond the 45-minutes or less goal. Our Quality Program Specialist worked collaboratively with multiple members of the hospital's team, including the Emergency Department's Medical Director and Director of Nursing, and the Stroke Coordinator to collectively identify areas of the stroke alert process that were leading to delays. In November of 2019, the hospital implemented all best practice recommendations per the American Stroke Association and our guidelines.

Since implementation, we identified, during monthly process improvement meetings, additional educational opportunities to further streamline their new process, including revising the stroke blood pressure management algorithm and identifying key components to complete at the Pit Stop to meet the 5-minutes or less goal all revised in Q1/Q2 2020.

The Result

In November of 2019, staff were provided education on activation immediately upon notification by EMS of incoming stroke alert. This enables the TeleNeurologist to be on camera when the patient arrives at the facility, allowing them to hear critical information from EMS and expedite patient care.

A comprehensive review of the current stroke process was completed, and areas of common delays were streamlined using our best practices. These changes included:

- A Pit Stop process when the patient arrives to quickly assess and triage stroke patients
- Patients are now taken straight to CT after the Pit Stop, avoiding rooming, which can lead to delays
- A stroke kit containing alteplase and blood pressure medications was created and implemented to ensure quick access and availability
- The TeleStroke cart is now being taken to CT to ensure that the neurologist can quickly assess and make decisions on treatment
- Alteplase administration is being completed in Radiology with the neurologist remaining on screen to assist staff with dosing, and a time out procedure is completed to ensure all patient safety measures are being reviewed

The Takeaways

- ✓ The hospital committed to improving DTN times
- ✓ Since going live, DTN medians have improved by 51%
- ✓ The implementation of our best practices have attributed to the success of the facility's stroke program

