



INTERNATIONAL STROKE CONFERENCE 2024 POSTER ABSTRACTS

SESSION TITLE: HEALTH SERVICES, QUALITY IMPROVEMENT, AND PATIENT-CENTERED OUTCOMES
POSTERS II

Abstract TP115: Stroke Metrics Reporting to Hospital Leadership Advances Thrombolysis and Thrombectomy Rates in a Competitive Region: Analysis of SETRAC Registry

Chethan P Venkatasubba, Grace Farquhar, Lintu Ramachandran and SETRAC Stroke Committee

Originally published 1 Feb 2024 | https://doi.org/10.1161/str.55.suppl_1.TP115 | Stroke. 2024;55:ATP115

Abstract

Background: The SouthEast Texas Regional Advisory Council (SETRAC) has actively engaged representatives from regional healthcare systems who collectively work towards advancing stroke care delivery. SETRAC has demonstrated its efficacy in improving thrombolysis rates in patients with acute ischemic stroke. We analyzed our regional data from 2014-2023 to evaluate the continued efficacy of acute stroke care.

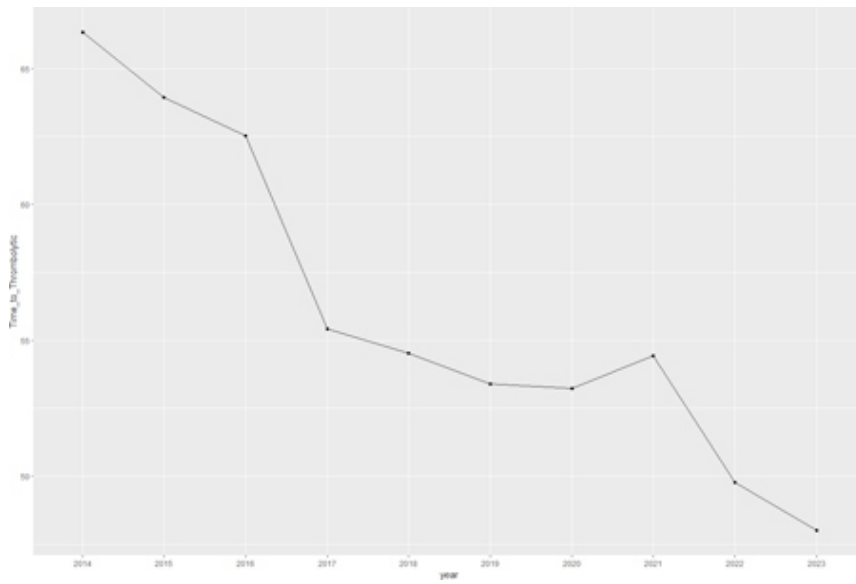
Hypothesis: We hypothesized that consistently and periodically reporting acute stroke metrics to the hospital leaders in a competitive environment improves acute stroke care as measured by: a) Percentage of patients receiving thrombolysis b) Time to receive thrombolysis c) Percentage of patients receiving thrombectomy

Methods: We analyzed the stroke care metrics of our regional centers from the Get With The Guidelines (GWTG)[®]-Stroke registry. SETRAC stroke committee compiled and shared this data with the coordinators and hospital administrators on a quarterly basis. Blinded metrics were shared utilizing visual tools such as bar graphs. We performed linear analyses to evaluate the increase in the percentage of patients receiving thrombolysis, and those treated within 45 minutes.

Results: 31 hospitals reported treating a total of 93,688 patients from 2014-2023. The rates of thrombolysis increased from 7.10% in 2014 to 11.8% in 2023 ($p < 0.001$). We also observed that the mean time to thrombolysis decreased from 66 minutes in 2014 to 48 minutes in 2023 (p -value < 0.001). We also observed that the percentage of patients who received endovascular intervention significantly increased from 0.02% to 6.2% (p -value < 0.001).

< back

receiving thrombolysis and thrombectomy.



[Download figure](#)

Footnotes

Author Disclosures: For author disclosure information, please visit the ASA's International Stroke Conference 2024 [Online Program Planner](#) and search for the abstract title.

Previous
<

^ Back to top

Next
>