



**OLD DOMINION EMERGENCY MEDICAL SERVICES ALLIANCE INC.**

1421 Johnston-Willis Drive  
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 www.odemsa.vaems.org

**Stroke Committee**

**March 5, 2015**

MARY MORRISSETTE AND STACIE STEVENS, CO-CHAIRS  
 ODEMSA CONFERENCE AND EDUCATION CENTER

**Attendance:** Stacie Stevens, Mary Morrisette, Donna Doherty, Ashley Hansen, Anne Fereday, Allen Yee, Wayne Harbour, Al Thompson, Cam Crittenden, Mike Harmon, Jessica Goodman, Brad Taylor, John Dugan, Chris Lindsay, Valeta Daniels

**Via Teleconference:** Pat Lane, Diane Herbert, Danny Garrison, John Sayers, Lindsay Parker

**Staff:** Rachel Dillon

**Materials Distributed** Agenda, Previous Minutes, Stroke Guidelines, flyers on two separate neuro conferences

Topic/Subject	Discussion	Recommendations, Action, Follow-up; Responsible Person
<b>Call to Order:</b>	Stacie calls the meeting to order at 10:02am. Introductions are made, and it is determined that we do not have a quorum. Minutes reviewed, but could not be approved at this time. Spelling errors to be corrected. Pat Lane later joins on the phone, giving us a quorum.	
<b>Reports:</b>	<p><b>Bon Secours</b>            Mike Harmon – Our EMS expo last weekend went very well.            Pat Lane – Our neuro interventional surgery office will hopefully be opening April 1<sup>st</sup>. We have also expanded our teleneurology services to include the Watkins Center. St. Mary's received the Elite award for Get With The Guidelines.</p> <p><b>CJW</b>            Donna Doherty – We are working on improving our door-to-needle times, and have developed a task force concentrated on improving them. I have also been at Chippenham more often to help improve their stroke knowledge base.            Brad Taylor – We will have a neuro CE dinner on March 24<sup>th</sup>.            Mary Morrisette – Going through the comprehensive stroke center process.</p> <p><b>SRMC</b>            Anne Fereday – We have been working on our door-to-needle times and have been improving. We have also started 24/7 teleneurology for stroke alerts. We also have</p>	



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<p>JRMC</p> <p>Henrico Doctors</p> <p>VCU</p> <p>RAA</p> <p>Chesterfield Fire</p> <p>ODEMSA</p>	<p>started allowing anyone to call in-house stroke alerts, not just the attending.</p> <p>Ashley Hansen – We are in the window to do stroke recertification.</p> <p>Diane Herbert – We have given tPA 5 times this year, all in under 60 minutes.</p> <p>Stacie Stevens – We are going through the comprehensive stroke center process. We also received the Elite Plus award from AHA.</p> <p>Wayne Harbour – No report</p> <p>John Sayers – no report</p> <p>Rachel Dillon – RSAF grants are still open through March 16<sup>th</sup> at 05:00pm. We have opened our EMS award nominations, and will be accepting nominations through June 5<sup>th</sup> at 05:00pm; the applications are available on the ODEMSA website.</p>	
<p><b>Old Business</b></p>	<p>After reports, discussion immediately turns to reviewing the updated Stroke Guidelines that the workgroup has produced, with the following changes to be made:</p> <ul style="list-style-type: none"> <li>- Page 2, bulleted list: Include goals of FAST scale and blood glucose within 10 minutes, notifying hospital of stroke alert within 5 minutes of patient assessment</li> <li>- Page 4, third paragraph: “Iv-lytic patients, complications, and other neuro interventions.”</li> <li>- Page 5: HCA is Hospital Corporation of America</li> <li>- Page 6: “A workgroup will develop stroke triage quality measures and report back to the committee.” Remove the rest of the monitoring section.</li> </ul> <p>The guidelines discussion was then tabled temporarily to discuss the tPA transfer sheet, which was included as an appendix to the Stroke Plan. There were no changes that the group wanted to make. Dr. Yee clarified that the state requires a paramedic to transport a tPA patient. The post-IV tPA transfer sheet was unanimously approved.</p> <p>Discussion returned to the rest of the Stroke Plan. Group agreed that “Stroke Alert” would be the standardized term used by EMS when calling in a report. Additional</p>	<p><b>Motion by:</b>          Allen Yee  <b>Seconded by:</b>          Diane Herbert  <b>Vote:</b> Approve tPA transfer sheet</p>



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	<p>changes discussed:</p> <ul style="list-style-type: none"> <li>- Page 2, bulleted list: Complete a FAST scale and blood glucose within 10 minutes. Contact the hospital within 5 minutes of completing this assessment.</li> </ul> <p>The 2015 Stroke Triage Plan was unanimously approved.</p>	<p><b>Motion by:</b> Allen Yee  <b>Seconded by:</b> Brad Taylor  <b>Vote:</b> Approve 2015 Stroke Plan</p>
<b>New Business</b>	<p>There was a brief discussion of how to get education on these changes out to the EMS providers. Group decided that the Professional Development Committee and protocol changes will handle a large amount of it.</p> <p>Group then discusses the Virginia Stroke Center Task Force meeting. Mary explains that a discussion came up of comprehensive stroke centers, and that, at this time, the Stroke Center Task Force is not in favor of comprehensive stroke centers at this time. Stacie adds that the task force feels that the money that is invested in becoming comprehensive is not the best use of resources.</p> <p>Stacie also mentions that the FAST scale does not include posterior strokes. There is a move towards BEFAST, which includes “Balance” and “Eyes.” It may also help to educate EMS on large vessel occlusions, which actually do need to go to a comprehensive stroke center. Allen suggests changing the Stroke Plan now to include BEFAST in the bullet points instead of the FAST scale. This modification to the document is unanimously approved.</p> <p>There is no further business from the floor.</p>	<p><b>Motion by:</b> Allen Yee  <b>Seconded by:</b> Ashley Hansen  <b>Vote:</b> Change FAST to BEFAST in Stroke Plan and approve plan</p>
<b>Next Meeting</b>	The next meeting is June 04, 2015, at 10:00 am.	
<b>Adjourn</b>	Meeting is adjourned at 11:14am.	