

Hospital-wide Communication to Improve Quality Outcomes of Stroke Patients Amy Garner, BSN, RN, CEN & Angela Rheal, BSN, RN, SCRN Baylor Scott & White Medical Center of Plano



INTRODUCTION

Early treatment of stroke has been linked to better outcomes for stroke patients. Code Stroke activations assists in providing stroke patients with timely, safe, and effective care upon presentation to the Emergency Department with stroke-like signs and symptoms.

BACKGROUND

Identified that we were not meeting our goals of :

- Getting patients to CT in time
- Our labs were being delayed
- NIHSS were not being documented on all patients .
- We were falling out on completing dysphagia screens on qualified patients.

PURPOSE

Purpose: To improve turnaround times and compliance of CT, Lab, NIHSS, and dysphagia screens.

Objectives: By December 2016, CT and Lab turnaround (TAT) door to interpretation within 45 minutes) will consistently meet or exceed the target of 80% compliance.

 By December 2016, NIHSS assessments and dysphagia screenings will consistently meet or exceed the target of 80% compliance.

ACTIONS TAKEN

Implemented a Code Stroke algorithm in the Emergency Department that includes:

- Overhead hospital –wide paging
- CT to call ED with CT table availability
- Secretaries place reminder order to complete dysphagia screen on admitted patients.

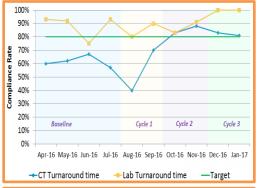
Employees, managers, and physicians were educated on Code Stroke algorithm, patient safety, standard of care, and BSWMC-Plano goals.

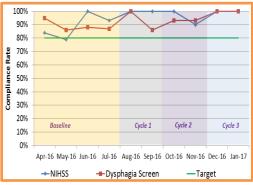
OUTCOMES

With the increased compliance of CT and Lab turnaround times, we had:

- Better patient outcomes
- Earlier TPA administration determination
- Earlier Interventional determination.







RESOURCE CONTACTS

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TAKEAWAYS

An increase in NIHSS and dysphagia screenings resulted in:

- Immediate neurology consult
- A potential increase of patients identified as eligible for Endovascular treatment.
- Earlier identification of aspiration risks.
- Decrease in aspiration pneumonia instances.

REFERENCES

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