

## Quality Data – Stroke Quality Measures

Percent of patients who receive care in accordance with national guidelines:	Milton S. Hershey Medical Center	All Comprehensive Certified Stroke Centers	All Pennsylvania Hospitals
Treatment to prevent deep vein thrombosis for those who are on bedrest by the second day in hospital. <i>Patients with prolonged inactivity are at risk for developing blood clots, which could lead to another stroke.</i>	<b>97.5%</b>	97.7%	96.9%
Antithrombotic medication prescribed at discharge for those with ischemic stroke. <i>These medications prevent blood clots, which could lead to another stroke.</i>	<b>100%</b>	99.7%	99.9%
Anticoagulation medication at discharge for those with ischemic stroke and atrial fibrillation. <i>In atrial fibrillation, your heart doesn't contract fully. Blood can pool and form clots. Anticoagulation medications prevent clot formation.</i>	<b>100%</b>	98.8%	98.8%
Intravenous clot buster (TNK) is given within 60 minutes to those who arrive at the hospital within two hours of when symptoms began. <i>The sooner you received the clot-busting drug, the better your chances for recovery. The clot-buster, TNK, must be delivered within three hours of when symptoms began.</i>	<b>100%</b>	96.4%	86.9%
Antithrombotic medication by the end of hospital day two for those with an ischemic stroke. <i>These medications prevent blood clots, which could lead to another stroke.</i>	<b>98.2%</b>	97.4%	98.4%
Cholesterol reducing medications (statins) at discharge for those with high or unknown cholesterol levels, or those who were on a cholesterol-lowering drug prior to admission. <i>High cholesterol levels raise your risk for stroke.</i>	<b>100%</b>	99.3%	99.4%
Education about warning signs, calling 911, and risk factors for stroke. <i>Knowing the warning signs and calling 911 help you to receive prompt medical attention. Knowing your risk factors will help you to take action to prevent another stroke.</i>	<b>100%</b>	97.1%	97.5%
Rehabilitation services assessment completed. <i>Rehabilitation can help recovery of speech and motor function.</i>	<b>100%</b>	99.5%	99.2%

## Quality Data – Comprehensive Stroke Center Measures

Quality measures for hospitals certified as Comprehensive Stroke Centers

Percent of patients who receive care in accordance with national guidelines:	Milton S. Hershey Medical Center	All Comprehensive Certified Stroke Centers	All Pennsylvania Hospitals
Documented NIHSS score <i>National Institute of Health Stroke Severity (NIHSS) score is a measure of deficits.</i>	<b>96.4%</b>	92.5%	91.1%
Favorable mRS at 90 days <i>Modified Rankin Score (mRS) is a measure of functional independence.</i>	<b>46.9%</b>	44.9%	48.2%
Documented SAH and ICH scores <i>Subarachnoid Hemorrhage (SAH) and Intracerebral Hemorrhage (ICH) scores are measures of severity of stroke.</i>	<b>63.6%</b>	87.2%	72.5%
Procoagulant reversal agent administered <i>ICH patients on anticoagulants who receive reversal medication.</i>	<b>0%</b>	95.4%	84.0%
Hemorrhagic transformation <i>Stroke patients who develop an intracranial hemorrhage after TNK or endovascular clot retrieval. Goal is 0%.</i>	<b>2.9%</b>	5.2%	4.4%
Nimodipine treatment <i>SAH patients who received nimodipine for vasospasm prevention.</i>	<b>100%</b>	95.1%	94.6%
Post-treatment reperfusion grade <i>Reperfusion grade indicates success of re-opening the cerebral artery.</i>	<b>75.0%</b>	90.3%	87.8%
Timeliness of Reperfusion <i>Arrival time to achieving successful re-opening of the cerebral artery.</i>	<b>48.0%</b>	77.6%	70.3%