



SETRAC Stroke Coordinators Subcommittee

Wednesday, June 28, 2023
SETRAC Conference Center, 1111 N. Loop West, Suite 160, Houston, TX 77008
Virtual Meeting

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TOPIC	DISCUSSION/RECOMMENDATION	ACTION/FOLLOW-UP
Presenter: Tonia Shelton/Michelle Vu Topic: Call to Order/Approval of Minutes	Meeting called to order. Minutes from April 26, 2023 were approved with no changes. Attendance will now be tracked by going to www.setrac.org/stroke . This is where you will enter your code words at the beginning and end of the meeting.	The committee has no further recommendations. 1 st Code word - Beach
Presenter: LaTriece Jones Topic: Stroke Education Workgroup - Best Practice Education - Wake-up Stroke	LaTriece Jones, Stroke Coordinator from Memorial Hermann Northeast presented on wake-up stroke for their best practice. Slides were presented on statistics and how we can treat patients that wake up with a stroke. Statistics show stroke is the 5 th cause of death among adults in the U.S. Acute ischemic strokes account for about 85% of all strokes. Only about 25% of patients get to the Emergency Department within 4.5hrs of onset and therefore most are not candidates Thrombolytics. Only 3–9% of patients with strokes receive Thrombolytics. LaTriece show slides and defined to the members exactly what's considered a wake-up stroke. An ischemic stroke that is associated with neurological symptoms on awakening. She shared a slide on THE PERFECT STORM of events that led up to a stroke. LaTriece expressed the importance of having a multidisciplinary team approach is its needed. Including EMS, Primary Care Physicians and ED and Stroke Teams. LaTriece presented a slide on chronological clock versus tissue clock imaging modalities. She also discussed MRI importance as it remains superior in dating the age of a stroke especially in the setting of a wake-up stroke. MRI in detecting ischemia within minutes and detecting smaller lesions (less than 4 mm). Superior to CT for identifying strokes less than 12 h since the "last seen normal" time. Use of mismatch between DWI and FLAIR. She showed a slide on an article called "THE EVIDENCE". WAKE-UP 1005 patients with stroke with an unknown LSN of onset. DWI-FLAIR mismatch used to determine age of the lesion. Results: 48% of the lesions were less than 4.5 h old and therefore patients could be considered eligible for IV rtPA. This trial demonstrated that there is potential for treatment with IV rtPA in a large group of wake-up strokes despite the barrier of a chronological clock. She also reported statistics from an article MR WITNESS Patients were evaluated by NCCT at 24 h, an MRI at 30 days, at mRS at 90 days. At 90 days, 39% of patients had at mRS of 0–1. MR	The committee has no further recommendations



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	WITNESS demonstrated potential safety in extending the IV rtPA window in a subset of patients as well as utility of MRI is determining “early stroke.” NCCT’s speed and availability allow it to be useful in the early evaluation of suspected stroke patients and to rule out intracerebral hemorrhage. She asked the members does anyone use thrombolytics. There was open discussion between the members on the difference in their facilities.	
Presenter: Susan Zamora/Stacey Day Topic: Stroke Data Subcommittee ○ Subcommittee Update	Susan recapped the discussion from the Stroke Data Committee Meeting. Susan informed members that Grace offered to upload data for any facilities that need help with that. They also discussed working on new data dictionary and how to log data, unknown vs. undocumented. Grace recapped the discussion that was had on type of imaging performed and determining the hierarchy for validation. The group decided to get rid of the validation rule. Susan mentioned getting the definition manual finalized before the next meeting, as it needs to be presented to the Stroke Committee for approval. Grace was thanked for all her hard work on the stroke data and numerous reports and presentations.	The committee has no further recommendations
Presenter: Melanie Topic: Stroke Education ○ August Best Practice Education	Melanie thanked LaTriece for her great presentation. She reminded the members of the next stroke education facilities scheduled to present at the next meeting. Houston Methodist Baytown and/or Memorial Hermann Sugarland are scheduled to present in at the august meeting	The committee has no further recommendations
Open Discussion	Grace mentioned, at a previous Stroke Committee meeting Dr. Rao suggested looking at data thrombolytic usage. She is suggesting instead of waiting until the next stroke data subcommittee meeting, she asked was there a workgroup that would like to meet to look at data ASAP, as the deadline for ISC is quickly approaching. Grace suggested the week after the 4 th of July holiday. She is requesting any volunteers to assist with creating a workgroup. No volunteers during this meeting, but the members were informed to contact the SETRAC stroke team if interested.	The committee has no further recommendations.



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Adjournment / Next Meeting	There being no other items for discussion, the meeting adjourned. The next in-person meeting will be August 23, 2024.	2 nd Code Word -Ocean