North Central Region

2024 Q1 - 2024 Q4

EMS Pre-notification: Percent of stroke patients who had advance notification to the hospital provided by EMS

Registry indicator for this metric:

• Advanced notification by EMS = (Yes)

Anonymized Hospital	2024 Q1	2024 Q2	2024 Q3	2024 Q4
A *	100.0%	0.0%	N/A	N/A
В	100.0%	50.0%	100.0%	66.7%
С	83.3%	90.9%	100.0%	87.5%
D	90.9%	75.0%	83.3%	0.0%
E*	100.0%	N/A	N/A	N/A
F	70.4%	76.9%	70.6%	68.0%
G	25.0%	0.0%	25.0%	80.0%
Н	60.0%	37.5%	33.3%	20.0%
I	100.0%	100.0%	100.0%	25.0%
J	39.0%	59.3%	51.3%	47.1%
Region	57.7%	58.1%	62.1%	53.3%
State	75.7%	77.8%	76.0%	71.0%

North Central Region

2024 Q1 - 2024 Q4

Stroke Band ID Documentation: Percent of stroke patients with a correctly documented stroke band ID Registry indicator for this metric:

• Stroke Band Identification Number (ID) starts with letter "S" or "s" followed by 6 digits (0-9) for a total of 7 characters, confirmed by hospital

Anonymized Hospital	2024 Q1	2024 Q2	2024 Q3	2024 Q4
A *	100.0%	0.0%	33.3%	N/A
В	75.0%	57.1%	100.0%	71.4%
С	100.0%	100.0%	100.0%	100.0%
D	50.0%	100.0%	82.4%	53.3%
E*	100.0%	N/A	N/A	N/A
F	97.9%	100.0%	97.0%	97.7%
G	71.4%	100.0%	66.7%	85.7%
Н	81.8%	84.6%	68.4%	85.7%
I	100.0%	100.0%	100.0%	100.0%
J	58.1%	66.7%	64.2%	65.5%
Region	72.8%	77.8%	75.9%	79.4%
State	78.3%	77.7%	81.0%	82.0%

North Central Region

2024 Q1 - 2024 Q4

Door to CT within 25 minutes: Percent of stroke patients who received brain imaging within 25 minutes of hospital arrival

Registry indicator for this metric:

• Date/Time Brain Imaging Initiated - Arrival Date/Time ≤ 25 minutes

Anonymized Hospital	2024 Q1	2024 Q2	2024 Q3	2024 Q4
A*	0.0%	0.0%	N/A	N/A
B*	100.0%	75.0%	100.0%	0.0%
С	55.0%	62.5%	44.4%	100.0%
D	88.9%	71.4%	90.0%	40.0%
E*	N/A	N/A	N/A	100.0%
F	78.1%	91.3%	87.0%	74.1%
G	66.7%	66.7%	100.0%	100.0%
Н	75.0%	80.0%	71.4%	100.0%
l*	63.6%	52.9%	42.9%	N/A
J	63.4%	78.7%	61.5%	59.3%
Region	70.0%	80.4%	78.4%	68.4%
State	72.0%	74.0%	71.4%	72.0%

North Central Region

2024 Q1 - 2024 Q4

Defect-Free Care: Percent of stroke patients who received all interventions for which they were eligible among the 13 component measures including: IV Thrombolytics Arrive by 3.5 Hour/Treat by 4.5 Hour, Early Antithrombotics, VTE Prophylaxis, Antithrombotics, Anticoag for AFib/Aflutter, Smoking Cessation, Intensive Statin at Discharge, Stroke Education, Rehabilitation Considered, Time to IV Thrombolytic – 60 min, LDL Documented, NIHSS Reported, Time to IV Thrombolytic – 45 min

Registry indicator for this metric:

• Total number of patients who were included in the numerator of every component measure in with they were included in the denominator

Anonymized Hospital	2024 Q1	2024 Q2	2024 Q3	2024 Q4
A*	100.0%	50.0%	0.0%	0.0%
В	33.3%	16.7%	40.0%	0.0%
С	88.9%	50.0%	58.3%	91.7%
D	33.3%	28.6%	38.5%	36.4%
E*	N/A	N/A	N/A	N/A
F	73.0%	58.6%	53.8%	61.8%
G	40.0%	75.0%	25.0%	50.0%
Н	83.3%	50.0%	33.3%	100.0%
I	100.0%	50.0%	60.0%	75.0%
J	31.1%	36.1%	43.1%	38.2%
Region	50.0%	41.4%	43.5%	45.0%
State	78.0%	78.8%	76.2%	78.3%