

Arkansas Stroke Registry Blinded Performance Report

Northeast 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	66.7%	57.1%	33.3%	0.0%
B	71.4%	90.3%	59.1%	5.0%
C*	100.0%	100.0%	N/A	100.0%
D	33.3%	0.0%	0.0%	0.0%
E	18.2%	0.0%	0.0%	0.0%
F	81.3%	91.7%	81.3%	77.8%
G*	N/A	0.0%	100.0%	66.7%
H*	0.0%	50.0%	N/A	N/A
I	100.0%	100.0%	100.0%	100.0%
J	100.0%	100.0%	100.0%	62.5%
K	0.0%	6.7%	30.8%	100.0%
L	87.5%	100.0%	50.0%	33.3%
M	72.1%	70.8%	78.3%	71.2%
Region	61.3%	68.4%	48.0%	37.2%
State	75.7%	77.8%	76.0%	71.0%

Note: Participation in the Arkansas Stroke Registry by hospitals is voluntary. This table includes all hospitals in this region that participate in the AR Stroke Registry. Hospitals that did not have qualifying patients to measure in select quarters (noted N/A) are assigned an asterisk (*).

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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	56.5%	50.0%	50.0%	57.1%
B	82.9%	82.4%	73.8%	71.1%
C	100.0%	100.0%	100.0%	100.0%
D	66.7%	100.0%	50.0%	75.0%
E	48.5%	53.1%	53.1%	52.0%
F	90.2%	92.4%	92.1%	93.8%
G	100.0%	100.0%	100.0%	33.3%
H	80.0%	80.0%	100.0%	83.3%
I	90.9%	87.3%	93.8%	92.3%
J	100.0%	100.0%	100.0%	94.4%
K	50.0%	50.0%	68.2%	47.4%
L	100.0%	60.0%	80.0%	100.0%
M	1.1%	2.6%	4.1%	1.4%
Region	76.4%	77.1%	78.3%	77.1%
State	78.3%	77.7%	81.0%	82.0%

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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	81.8%	75.0%	100.0%	100.0%
B	58.8%	64.3%	60.9%	63.2%
C*	100.0%	83.3%	100.0%	N/A
D	50.0%	100.0%	100.0%	100.0%
E	50.0%	72.7%	84.6%	88.9%
F	83.3%	79.2%	72.5%	70.0%
G	0.0%	50.0%	100.0%	33.3%
H*	N/A	100.0%	100.0%	100.0%
I	80.5%	83.3%	73.0%	66.7%
J	90.9%	88.9%	100.0%	100.0%
K	80.0%	83.3%	85.7%	57.1%
L	83.3%	50.0%	0.0%	25.0%
M	67.3%	58.1%	64.1%	66.9%
Region	73.0%	75.9%	78.9%	73.7%
State	72.0%	74.0%	71.4%	72.0%

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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 which they were included in the denominator

Anonymized Hospital	2024 Q1	2024 Q2	2024 Q3	2024 Q4
A	0.0%	10.0%	33.3%	10.0%
B	50.0%	51.6%	35.0%	19.4%
C*	50.0%	60.0%	N/A	50.0%
D	66.7%	60.0%	50.0%	33.3%
E	93.8%	89.5%	86.4%	100.0%
F	91.7%	95.0%	97.0%	97.1%
G	100.0%	33.3%	50.0%	66.7%
H	50.0%	50.0%	85.7%	20.0%
I	91.6%	92.7%	93.5%	91.8%
J	81.8%	100.0%	87.5%	50.0%
K	33.3%	50.0%	58.8%	71.4%
L	100.0%	50.0%	25.0%	80.0%
M	79.4%	82.7%	87.6%	76.5%
Region	71.1%	73.1%	75.5%	68.0%
State	78.0%	78.8%	76.2%	78.3%

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