

Arkansas Stroke Registry Blinded Performance Report

Southwest Region

2025 Q1 – 2025 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	2025 Q1	2025 Q2	2025 Q3	2025 Q4
A*	N/A	N/A	N/A	N/A
B*	N/A	N/A	N/A	N/A
C	83.3%	75.0%	75.0%	78.9%
D	100.0%	100.0%	50.0%	100.0%
E*	N/A	N/A	N/A	N/A
F	71.4%	100.0%	75.0%	87.5%
G	44.4%	66.7%	42.9%	77.8%
I	0.0%	0.0%	0.0%	33.3%
J	100.0%	100.0%	100.0%	100.0%
K	100.0%	100.0%	95.2%	100.0%
L	100.0%	100.0%	33.3%	100.0%
M*	100.0%	75.0%	N/A	100.0%
N	57.1%	41.5%	56.5%	60.5%
O*	33.3%	N/A	0.0%	0.0%
Region	59.9%	59.6%	74.6%	79.8%
State	76.1%	74.7%	78.6%	82.7%

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	2025 Q1	2025 Q2	2025 Q3	2025 Q4
A*	N/A	N/A	N/A	N/A
B*	N/A	N/A	N/A	N/A
C	78.8%	85.7%	92.9%	93.3%
D	60.0%	39.3%	50.0%	70.6%
E*	16.7%	6.3%	N/A	N/A
F	72.7%	88.9%	50.0%	100.0%
G	53.3%	85.7%	72.2%	57.1%
I	38.5%	66.7%	75.0%	76.9%
J	79.5%	86.0%	89.1%	80.6%
K	86.4%	84.2%	82.1%	79.3%
L	100.0%	100.0%	66.7%	100.0%
M	100.0%	100.0%	66.7%	80.0%
N	26.9%	46.6%	53.5%	48.7%
O	50.0%	0.0%	50.0%	40.0%
Region	43.2%	53.8%	70.8%	68.1%
State	80.7%	83.0%	81.2%	82.3%

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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	2025 Q1	2025 Q2	2025 Q3	2025 Q4
A*	N/A	N/A	N/A	N/A
B*	N/A	N/A	N/A	N/A
C	86.7%	100.0%	78.3%	94.4%
D	83.3%	64.3%	55.6%	81.8%
E*	100.0%	50.0%	N/A	N/A
F	71.4%	71.4%	50.0%	83.3%
G	44.4%	66.7%	18.2%	20.0%
I	66.7%	66.7%	N/A	83.3%
J	50.0%	73.3%	56.5%	71.7%
K	42.9%	75.0%	63.6%	71.4%
L	100.0%	100.0%	100.0%	0.0%
M	66.7%	100.0%	100.0%	100.0%
N	78.5%	77.8%	76.5%	70.4%
O*	100.0%	N/A	40.0%	0.0%
Region	75.0%	75.4%	66.5%	72.9%
State	75.1%	74.9%	74.5%	75.6%

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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	2025 Q1	2025 Q2	2025 Q3	2025 Q4
A*	N/A	N/A	N/A	N/A
B*	N/A	N/A	N/A	N/A
C	68.0%	47.8%	76.7%	86.7%
D	50.0%	30.8%	41.2%	50.0%
E*	83.3%	93.8%	N/A	N/A
F	83.3%	66.7%	50.0%	70.0%
G	33.3%	0.0%	50.0%	10.0%
I	33.3%	28.6%	50.0%	50.0%
J	77.1%	77.6%	78.7%	71.3%
K	59.1%	36.8%	55.6%	32.1%
L*	0.0%	0.0%	0.0%	N/A
M	85.7%	75.0%	66.7%	50.0%
N	95.2%	93.7%	97.3%	97.1%
O	20.0%	0.0%	0.0%	50.0%
Region	81.3%	71.7%	79.7%	76.3%
State	78.1%	77.1%	77.9%	79.2%

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