



**North Country
Regional Emergency Medical
Advisory Committee**

Policy Statement

Serving: St. Lawrence, Jefferson, and Lewis Counties

No. 17-07

Date: 4/03/17

Re: Stroke

Page 1 of 1

Purpose

Clarification of timeline for consideration of EMS transport to a NYS DOH Designated Stroke Center

Background

Current American Heart Association/American Stroke Association (AHA/ASA) guidelines identify the use of intravenous (IV) tPA (activase) for thrombolysis as a standard of care for the ischemic stroke patient that presents to the emergency department within 3 hours of the time that they were last seen well or last known normal (LKW) and meeting the established tPA inclusion criteria. IV tPA may also be administered (off label) beyond 3 hours, up to 4.5 hours, additional inclusion/exclusion criteria, set forth by local hospital policy and procedure, may apply.

NYS EMS Collaborative Protocols have extended the window of transport to a NYS DOH Designated Stroke Center, up to 5 hours from the current 2 hours indicated in NYS DOH BLS protocol. Adherence to this policy change could potentially cause an eligible patient to be bypassed from local tPA capable North Country Hospitals to the nearest DOH Designated Stroke Center in Syracuse.

For these patients, this transport delay risks losing the established time window for tPA administration. Thus, the updated protocol can result in patients not receiving current established standard of care. Furthermore, the benefit of tPA is maximized by its timely administration, and any treatment delays attributed to this transport policy can negatively affect patient outcomes.

Policy

North Country EMS providers of all levels need to contact medical control if transport to a NYS Designated Stroke Center is outside the 2-hour window. Medical control will assess the patient location and last known well to determine if the transportation to a Stroke Center may be circumvented, therefore allowing the transportation of the patient to a closer tPA capable facility. To maximize the benefit of stroke therapy, the early administration of tPA must be prioritized.

Current hospitals in these three counties that are capable of tPA administration include: Samaritan Medical Center, Lewis County General Hospital, Carthage Area Hospital, River Hospital, Claxton-Hepburn Medical Center, Gouverneur Hospital, Massena Memorial Hospital and Canton-Potsdam Hospital.