



EMS: ON THE FRONT LINES OF STROKE CARE



"If there is any sign of stroke at all, it is never a bad idea to treat the patient as if they are having a stroke until a physician can either rule a stroke in or out."

—Kaitlyn Reef, EMS Battalion Chief,
Fern Creek Fire Department – Louisville, KY

GET AHEAD OF
STROKE

Arrive. Survive. Thrive.®

Help us help them #SurviveStroke.

getaheadofstroke.org
info@getaheadofstroke.org

MISSED OPPORTUNITIES

Thousands of severe stroke patients who could survive instead face death or permanent disability. Why? They lack access to stroke systems of care that prioritize quality of care over proximity to care.

Less than 15% of severe stroke patients are transported to a neuroendovascular-ready (Level 1) stroke center. This means that:

- Patients end up at **hospitals that don't have the personnel or equipment** to treat their complex condition.
- **Time — and brain cells — lost in transfer** to facilities that provide appropriate care often leads to death or disability.

With each hour in which treatment fails to occur, the brain loses as many neurons as it does in almost 3.6 years of normal aging.¹

¹Miller, D. (2012). EMS1. Stroke: Time is brain in delivering EMS care. Retrieved from <https://www.ems1.com/air-medical-transport/articles/stroke-time-is-brain-in-delivering-ems-care-QbOcl6BftjpSN72y/>

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Cont. from page 1



WHY EMS IS THE ANSWER

When you arrive on the scene of a terrible car accident, you know where to take patients who have experienced severe trauma.

Stroke is a trauma of the brain, making it essential for those patients to also reach a Level 1 center as soon as possible. And you are on the front line.

In a recent survey of more than 600 first responders, we learned that 73.4% of EMS were confident in identifying a severe stroke. Patients need your expertise in assessing their condition and getting them to a stroke center equipped to help their complex and potentially deadly condition.

WHAT WE'RE WORKING FOR

The Get Ahead of Stroke® campaign is working to ensure that stroke symptoms are known and **taken seriously**; that people **call 911** at the first sign of stroke instead of transporting themselves; and that EMS have the knowledge and tools to assess stroke and get patients to a **Level 1 stroke center** when needed.

Many states are now modeling their stroke system of care after the trauma model: Patients with severe conditions go to Level 1. Is your state one of them? If not, get in touch with us at fjames@vancomm.com.

When we work together to improve stroke systems of care, patients can't lose!



WHAT WE CAN OFFER

We know that first responders care about taking care of their communities — it's why you do this work. That's why the Get Ahead of Stroke® campaign has developed a free mobile app that helps you assess stroke severity using common stroke scales.

By measuring, for example, the patient's ability to squeeze and release a hand or make facial expressions — physical indicators of a severe stroke — you can determine the best course of action for the patient, including the type of facility where the patient can receive appropriate care.

Download the free Stroke Scales for EMS app today on the iOS App Store and Google Play.

Get Ahead of Stroke®
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