Overlook Clinicians give Stroke Screenings to State Workers and Elected Officials

Trenton, NJ, June 19, 2006 – Last week, state employees and elected officials participated in a free stroke screening conducted by Overlook Hospital clinicians at the State Capitol in Trenton. Among the participants were New Jersey Senator Anthony Bucco (R) of Denville and Assemblyman Richard Merkt (R) of Randolph.

The stroke screening was part of an American Stroke Association awareness campaign: “Get with the Guidelines.” Stroke is common and on the rise and led the New Jersey Department of Health and Senior Services (DHSS) to propose legislation for state-designated primary and comprehensive Stroke Centers. The legislation is part of the state’s new focus on hospital stroke response for an aging population.

On average, a stroke occurs every 45 seconds and kills nearly 157,000 people a year. That is about 1 in every 15 deaths. More than half of all stroke patients do not receive treatment that follows best practice guidelines. Many New Jersey hospitals lack the necessary staff and equipment for optimal triage and treatment of stroke patients.

For this reason, DHSS established a program to designate Stroke Centers throughout New Jersey to better provide stroke specific care in a safe and effective manner. This will help increase survival and decrease stroke-related disabilities throughout New Jersey.

Stroke Centers function like trauma centers, so that a network is established and patients are speeded to trained neurological teams. New Jersey will distribute grants totaling $3 million per year to stimulate the development of Stroke Centers throughout the state. Hospitals will be required to meet the detailed criteria for a lower-level Primary or higher-level Comprehensive Stroke Center designation.

Atlantic Health’s hospitals were recently awarded grants from the State of New Jersey to support the creation of a dedicated Comprehensive Stroke Center at Overlook Hospital in Summit, and Primary Stroke Centers at Morristown Memorial Hospital and Mountainside Hospital in Montclair/Glen Ridge.

“Few truly state-of-the-art stroke centers exist in the United States today and we are proud to count Overlook among that number,” said Shalini Bansil, MD, medical director of the Stroke Center for Overlook Hospital in Summit.

A stroke center needs an established “Code Grey” protocol. Overlook’s Code Gray is the stroke equivalent of the rapid response protocols used for cardiac and trauma emergencies. When a Code Gray is called, each step of the treatment process is timed so that not one of the 180 precious minutes is wasted.
“Many people with suspected stroke arrive at the emergency department with just enough time for a medical stroke team to diagnose and treat them,” said Bansil. “The window for clearing the clogged arteries responsible for stroke is a mere three hours. After that, doctors can no longer administer the only effective treatment for halting stroke’s damage: a clot-buster called tPA.”

Stroke Center designation requires the state to: establish detailed criteria for each Stroke Center level (Primary and Comprehensive); provide $3 million in grants per year to stimulate the development of designations; designate all hospitals that apply for and meet the criteria, and to process applications as a licensure amendment without a certificate of need.

Once hospitals are licensed as stroke centers, the new rule will amend hospital licensing standards to add a section on stroke. Final rulings and designations are expected in the New Jersey register by summer 2006.

Requirements for Primary Stroke Centers

New Jersey is encouraging as many general hospitals as possible to seek Primary Stroke Center designation. The requirements are:

- 24/7 Stroke Team to assess patient in Emergency Department within 15 minutes of arrival (stroke or suspicion of stroke)
- Written protocols, standing orders for emergency care
- On-staff neurology and Emergency Department personnel trained in diagnosis and treatment of acute stroke
- Telemetry or Cardiac Care Unit beds staffed by physicians and nurses with stroke training/experience
- 24/7 Neurosurgical services available within 2 hours directly or by arrangement with Comprehensive Stroke Center
- Acute Rehabilitation Services
- Stroke center director with special training and expertise
- 8 hours of CME/year on stroke for stroke center director
- 24/7 lab services within 45 minutes of order: blood testing, EKG, X-ray
- 24/7 neuro-imaging services able to perform studies within 25 minutes of order entry, including CT or MR, with studies interpreted by board certified radiologist or neurologist within 20 minutes of study completion
- Development of outcomes and quality improvement program, including patient database/registry; data to include:
  - Number of patients evaluated
  - Number of patients receiving acute interventions
  - Time from presentation to intervention
  - Patient Length of Stay (LOS)
  - Patient functional outcome
  - Patient morbidity
- Annual education provided on stroke diagnosis and treatment to personnel involved in caring for stroke patients
Requirements for Comprehensive Stroke Centers
New Jersey is seeking a sufficient number of hospitals as Comprehensive Stroke Centers to meet needs of all patients requiring a higher level of care. The requirements are:

- Satisfaction of all Primary Center criteria
- Neurological team capable of assessing and treating complex stroke and stroke-like symptoms
- Neuro-radiologist with Certificate of Added Qualification (CAQ) on staff
- Comprehensive rehab services on site or by transfer agreement
- Transfer agreements with Primary Stroke Centers to accept complex stroke patients
- Provision of guidance and CME to Primary Stroke Centers

About 700,000 Americans each year suffer a new or recurrent stroke. Stroke is a type of vascular disease that affects the arteries leading to and within the brain. It can be caused either by a clot obstructing the flow of blood to the brain or by a blood vessel rupturing and causing bleeding in the brain. When that happens, part of the brain cannot get the blood and oxygen it needs and starts to die.

“Learn to recognize the warning signs of a stroke, because time lost is brain lost,” noted Dr. Bansil. “Stroke is a medical emergency. Know the warning signs of stroke and teach them to others. Every second counts.”

Warning Signs of Stroke:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden, severe headache with no known cause

Call 9-1-1 immediately if you experience symptoms.