Comprehensive Stroke Center Public Reporting

The Brain Attack Coalition defines a Comprehensive Stroke Center (CSC) is a facility or system with the necessary personnel, infrastructure, expertise, and programs to diagnose and treat complex stroke patients who require a high intensity of medical and surgical care, specialized tests or interventional therapies.

The types of patients who might benefit from a CSC include patients with:

- Large ischemic stroke
- Hemorrhagic strokes
- Strokes from unusual etiologies
- Strokes requiring specialized testing or therapies
- Strokes requiring multispecialty management

Additional functions of a CSC is to serve as a resource center for area Primary Stroke Centers (PSC) providing expertise and higher lever care and management of patients when treatment is not offered at the PSC. Patients can be transferred through rapid triage and care facilitated for the most appropriate treatment through a collaborative arrangement with Emergency Medical Services (EMS).

Procedures done at a Comprehensive Stroke Center:

- Mechanical Thrombectomy for Acute Stroke
- Thrombolysis for Acute Stroke
- Cerebral Diagnostic Angiography
- Endovascular Stenting and Coiling of Aneurysms
- Stenting of Occlusive Lesions
- Embolization of Arteriovenous Malformations (AVM) and Fistulas (AVF)
- Spinal Diagnostic Angiography
- Embolization of Spinal Arteriovenous Malformations and Fistulas
- Placement of Ventriculostomy
- Clipping of Aneurysm
- Excision of AVM and AVF
- Removal of Intracerebral Hematoma
- Decompressive craniotomy

Since March of 2018, Community Hospital has been performing neuroendovascular procedures and serving our community with great success.

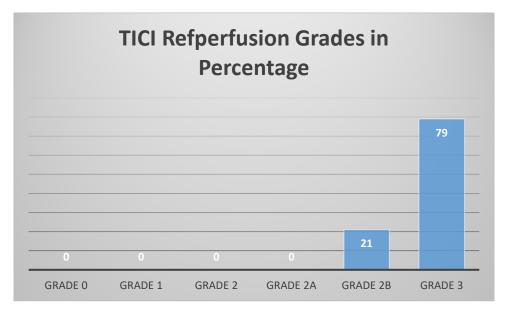
Since 2015, several groundbreaking trials proved that Mechanical Thrombectomy significantly reduces the disability associated with the most devastating strokes by actually removing the source of blockage or the blood clot from the brain, in most cases restoring complete blood flow. We measure this restored blood flow to the brain with a scoring scale called a TICI scale. This scale represents the reperfusion rate of blood restored to the brain. The scale is illustrated below:

Grade o	No perfusion
Grade 1	Penetration with minimal perfusion
Grade 2	Partial perfusion
2 a	Only partial filling (2/3) of the entire vascular territory is visualized
2b	Complete filling of all of the expected vascular territory is visualized, but the filling is slower than normal
Grade 3	Complete perfusion

Community Hospital's Outcomes are as follows:

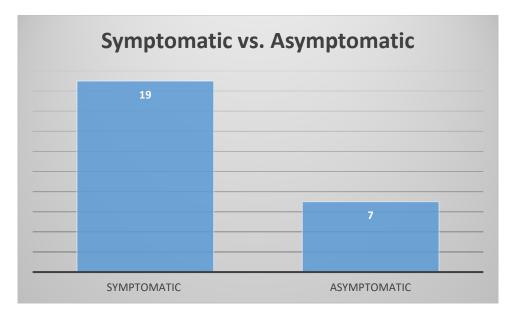
Mechanical Thrombectomy

- 17 total Mechanical Thrombectomy
- 79% of Mechanical Thrombectomy were TICI 3 and 21% were TICI 2b



Carotid Stent/Endarterectomy

- 26 Carotid Stent/Endarterectomy for CY18 Q4
- 30 Day Mortality Rate Asymptomatic = 0%
- 30 Day Stroke Rate Asymptomatic= 0%
- 30 Day Mortality Rate Symptomatic = 0%
- 30 Day Stroke Rate Symptomatic = 3.8% (n=1/26) Carotid Stent



Diagnostic Cerebral Angiography

- 112 Total Cases since March 1, 2018
- 47 Cases for CY18 Q4
- 30 Day Mortality Rate = 0%
- 30 Day Stroke Rate = 0%

