

Stroke Ready

LAWRENCEVILLE - Nearly 800,000 Americans suffer strokes annually, making it the leading cause of serious, long-term disability, as well as the fifth-leading cause of death in the United States.

To bring awareness to the situation, on the first Friday in February, which is designated as American Heart Month, Americans are asked to wear red from coast to coast. This Friday will mark the 18th National Wear Red Day, as the event was first held in 2002.

The annual groundswell unites millions of people for the common goal: The eradication of heart disease and stroke.

“I’ll be wearing red on Friday, for sure,” said Tammy Dohoney, a Registered Nurse who serves as Stroke Coordinator at Lawrence County Memorial Hospital. “But it’s easy to wear red if you’re from Lawrenceville.”

Along those lines, since 2014 Lawrence County Memorial Hospital has been recognized by the American Heart Association as a “Stroke Ready” facility, which should make residents of the county feel a little more at ease. The “Stroke Ready” designation means that the hospital has met the standards to support better outcome for stroke care. Some of the basic guidelines that must be set in place to receive the designation are a plan for early communication with Emergency Medical Services prior to bringing the patient to the Emergency Department and around-the-clock ability to perform diagnostic imaging, such as a CT Scan and laboratory testing to facilitate the administration of intravenous thrombolytics in eligible patients.

“The care our patients receive is our number one priority,” said Lawrence County Memorial Hospital Chief Executive Officer Don Robbins. “To be “Stroke Ready” to handle that type of emergency situation shows that the team at Lawrence County Memorial is committed to providing excellent care.”

Duhoney says that the hospital works hard to continually maintain the guidelines.

“Every year we have to prove we are still maintaining things,” she said. “We have to continually meet those guidelines. We have to submit proof every year that we’re still up to the standard, and every three years we must reapply for the designation.”

Health experts agree that the outcome of a stroke depends largely on how the patient is treated, and the sooner the better. The American Heart Association points out that for every eight patients treated with intravenous thrombolysis, one additional patient returns to living a normal life. Reducing the time between the emergency department arrival and intravenous

thrombolysis improves each patient's odds of a good outcome. In other words, the faster you move now, the better the patient's chances to move later.

Medical professionals stress that a stroke is an emergency. The National Stroke Association says it's important to remember to act FAST in such a situation.

- FACE: Ask the person to smile. Does one side of the face droop?
- ARMS: Ask the person to raise both arms. Does one arm drift downward?
- SPEECH: Ask the person to repeat a simple sentence. Does the speech sound strange?
- Time: If any of these signs are observed, call 9-1-1 immediately.

"The big things with strokes is the whole act FAST concept," Dohoney said. "If you suspect a stroke, don't wait. Go to your emergency room because time is brain. The longer your brain is without circulation, the more damage and longer lasting the effects you're going to have."

The first four hours that a patient is showing symptoms, she says, are crucial. There is available, effective medication, but it must be administered within the first four hours of symptoms arriving.

"That's why we're tracking time," Dohoney said. "We want to see if that patient got here within an hour of the onset of symptoms. We want them treated within an hour of the time they hit our door. And when we say treated, we want their lab work done and resulted. We want their x-rays done and resulted. We want a decision made and the medication administered within the first hour of presentation."

Being "Stroke Ready" means that the hospital has developed a program for improving stroke care by promoting consistent adherence to the latest scientific treatment guidelines. Such hospitals follow a standardized treatment plan and provide education to the emergency department staff, as well as the ancillary departments to ensure that high quality patient care is given to the stroke patient.

Once the patient is diagnosed and initially treated, they'll be sent to another facility - either by helicopter or ambulance - to a partnering hospital that has a neurovascular doctor on staff.

At that point, Dohoney continues to work, in order for LCMH to maintain its designation.

"We audit every chart of anyone who comes through and leaves with a diagnosis of a CVA or a stroke," she said. "We look at every one of them and see if they fell into the appropriate time frame."

Doing so will help Lawrence County Memorial Hospital maintain the designation it worked so hard to achieve.