

Notes for GWTG-Stroke Release - August 29th, 2018

Discharge Data Elements:

- 1) A new data element, “Smoking Cessation Therapies Prescribed” was added and will be enabled when “Anti-Smoking Tx” = Yes to allow you to track the specific types of cessation therapies your institution is providing at hospital discharge.

Anti-Smoking Tx: ☒ Yes ☐ No/ND ☐ NC ©

Smoking Cessation Therapies Prescribed

- ☒ Counseling
- ☒ Over the Counter Nicotine Replacement Therapy
- ☐ Prescription Medications
- ☐ Other
- ☐ Treatment not specified


EMS Form Group Data Elements:

NOTE: Not all hospitals have the EMS Form Group activated to support capture of these elements and the Pre-Hospital Care Measures. If you would like to turn on the form group, contact the IQVIA support desk at infosariooutcomesupport@iqvia.com and request that “The EMS Form Group” be added to your GWTG-Stroke Account. Please include your Hospital Name, Mailing Address and Site ID in the email.


- 1) Added two new codes under the field “Indicate the stroke screen tool used:” BE FAST and MEND

Initial Blood Pressure by EMS: 124 / 92 mmHg ☐ ND

Suspected stroke?

Indicate the stroke screen tool used: 

Stroke Screen Outcome:

Indicate the severity scale used? 

Positive for LVO?

If severity scale assessment completed, enter total score:

Dropdown menu options:

- CPSS
- BE FAST
- DPSS
- FAST
- LAPSS
- MASS
- Med PACS
- MEND
- mLAPSS
- OPSST
- ROSIER
- Other
- Stroke screen tool used, but tool used is unknown
- No stroke screen tool used
- Not documented

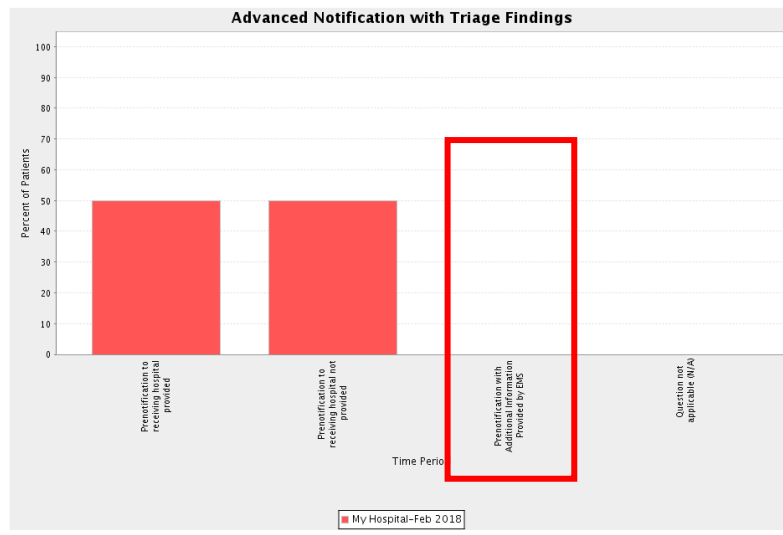
- 2) Added new optional field: “Initial Blood Pressure by EMS”

Initial Blood Pressure by EMS: 124 / 92 mmHg ☐ ND

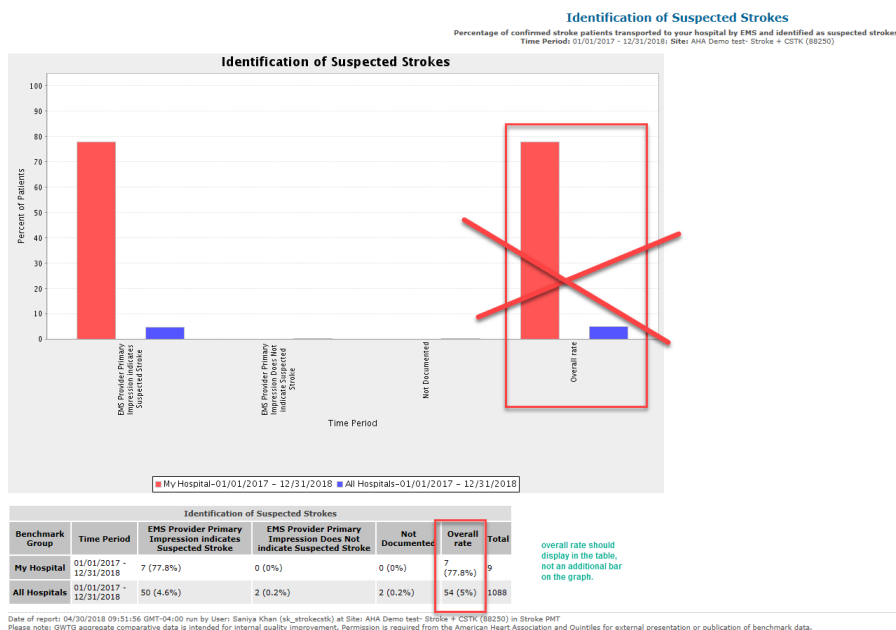
Pre-Hospital Care Measures:

Several Pre-Hospital Care Measures were updated to change display outputs and naming descriptions.

- 1) Advanced Notification with Triage Findings: Updated display to add one additional bar: Prenotification with Additional Information Provided to EMS.



2) Identification of Suspected Strokes: Updated to remove the overall rate bar in the display.



3) The following measures were updated to correct the description that follows the measure title. Previous descriptions (below) did not reflect these measures track the distribution of patients by category and instead described a rate measure.

- DIDO at 1st Hospital Prior to Transfer
- Times from FMC to EVT
- Use of Thrombolytic Checklist

OLD DESCRIPTION SAMPLE

DIDO at 1st Hospital Prior to Transfer

Door-in-Door-Out Time \leq 60 Minutes at First Hospital Prior to Transfer for Acute Therapy: Percentage of confirmed stroke patients transported to your hospital by EMS and for whom \leq 60 minutes was spent in the ED prior to transfer to a higher-level stroke center (e.g. PSC, CSC, etc.) for time-critical therapy.

Time Period: Apr 2018 - Jun 2018; Site: Albany Medical Center (10901)

DIDO at 1st Hospital Prior to Transfer

100

NEW DESCRIPTIONS

DIDO at 1st Hospital Prior to Transfer

Distribution of times for confirmed stroke patients transported to your hospital by EMS and were transferred to a higher-level stroke center (e.g. PSC, CSC, etc.) for time-critical therapy. The goal for DIDO is \leq 60 minutes.

Time Period: Feb 2018 - Feb 2018; Site: Detroit Receiving Hospital and University Health Center (20867)

Times from FMC to EVT

Distribution of time for confirmed stroke patients transported to your hospital by EMS and the time from first medical contact (FMC) to time of first pass (i.e. deployment) of device for endovascular thrombectomy (EVT). The goal for time from FMC to EVT is \leq 60 minutes.

Use of Thrombolytic Checklist

Percentage of confirmed stroke patients transported to your hospital by EMS and for whom a thrombolytic check was completed.

EMS Data Element Items Pending Future Release:

1. “Date/Time Brain Imaging Initiated by MSU”, “Date/Time IV tpa administered by MSU” and “EMS Unit Notified by Dispatch” are all appearing in bold in the current online form. These items are not Required and there is no associated error. They will be un-bolded in a release in the coming weeks. In the meantime, the paper CRF is NOT bold to reflect that these data elements are not required.

Set all EMS dates to the Arrival Date

Date/Time Brain Imaging Initiated by MSU:

Date/Time IV tpa administered by MSU:

EMS Unit Notified by Dispatch:

Dispatched as suspected stroke? ☐ Yes ☐ No ☐ Not Documented

EMS Unit Arrived on Scene:

EMS Arrived at Patient:

EMS Unit Left Scene:

EMS Unit Arrived on Scene:

EMS Arrived at Patient:

EMS Unit Left Scene:

Last Known Well as Documented by EMS:

Blood Glucose level:

Suspected stroke:

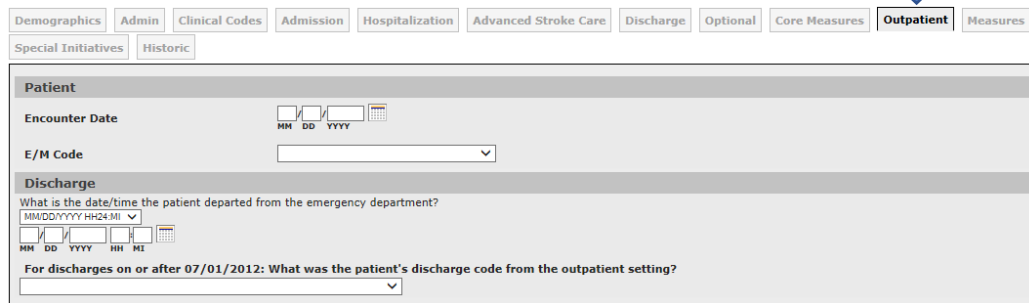
Acute Stroke Ready Data Elements:

A form group was added to facilitate the tracking of TJC Acute Stroke Ready (ASR) data elements. The data elements support tracking of the ASR inpatient and outpatient measures listed below. NOTE:

- While the data elements are available now, the measures will be added in a subsequent release. Once the measures are released the system will calculate numerator/denominator for each measure to facilitate CMIP submission. In the meantime, sites may download ASR elements for individual tracking.
- To turn on the form group, contact the IQVIA support desk at infosariooutcomesupport@iqvia.com and request that “The ASR Form Group” be added to your GWTG-Stroke Account. Please include your Hospital Name, Mailing Address and Site ID in the email.

To facilitate tracking of OP measures, ASR sites will see two NEW tabs on their form.

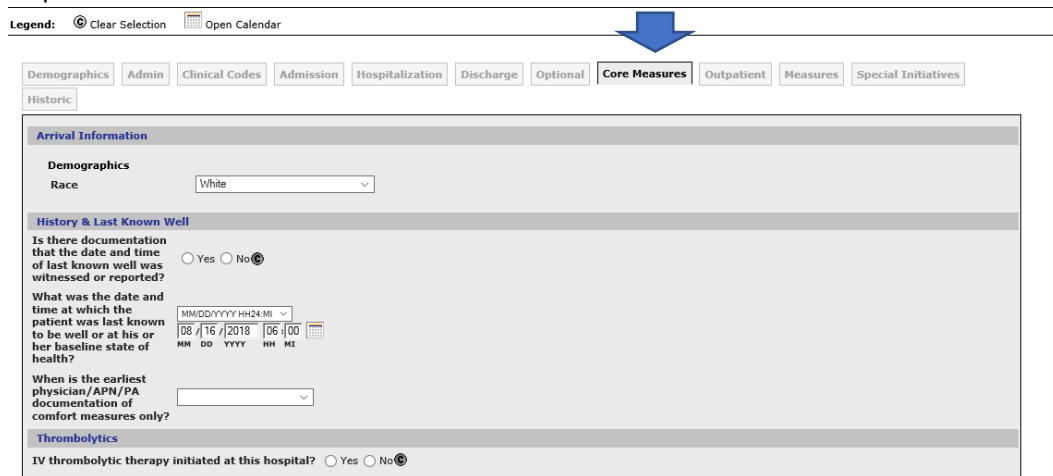
- Outpatient tab was added and will require completion when you answer “Yes, not admitted” to the “Not Admitted:” element.



The screenshot shows the 'Outpatient' tab selected in the top navigation bar. The form contains the following sections:

- Patient**
 - Encounter Date: MM/DD/YYYY
 - E/M Code: [Dropdown]
- Discharge**
 - What is the date/time the patient departed from the emergency department? MM/DD/YYYY HH:MM
 - For discharges on or after 07/01/2012: What was the patient's discharge code from the outpatient setting? [Dropdown]

- Core Measures tab was added and will require completion for acute ischemic stroke patients. The majority of these elements overlap with GWTG and will be automatically populated for you as you fill out the GWTG tab so little additional data collection will be required.



The screenshot shows the 'Core Measures' tab selected in the top navigation bar. The form contains the following sections:

- Arrival Information**
 - Demographics
 - Race: [Dropdown]
- History & Last Known Well**
 - Is there documentation that the date and time of last known well was witnessed or reported? ☐ Yes ☒ No
 - What was the date and time at which the patient was last known to be well or at his or her baseline state of health? MM/DD/YYYY HH:MM
 - When is the earliest physician/APN/PA documentation of comfort measures only? [Dropdown]
- Thrombolytics**
 - IV thrombolytic therapy initiated at this hospital? ☐ Yes ☒ No

ASR Planned Enhancements Post Release:

There are two enhancements planned to rapidly follow the ASR release to address workflow and data entry.

1. **Update to Not admitted:** An error is currently firing, indicating that “Admit Date” is required, even when “Yes, Not Admitted” is selected for “Not Admitted”. Users should not be required to enter an admission date, as these patients ARE not an admission. This should only impact a small number of records as this issue is limited to ASR sites, with not-admitted patients transferred out of your ED. A hot fix is planned shortly after the release to correct this and we will notify ASR users when this goes live. In the meantime, users can save the form as incomplete and this will not impact record submission to TJC. Additionally, when the update is live, you can go into prior records and mark as complete.

☐ 1 - Day 0 or 1
☐ 2 - Day 2 or after
☐ 3 - Timing Unclear
☒ 4 - Not Documented/UTD

What is the earliest documentation of port measures only?
 Admit Date/Time
 MM/DD/YYYY HH:MM
 16/2018 07:42

Admitted:
☒ Yes, not admitted
☐ No, patient admitted as inpatient
☒ Transferred from your ED to another acute care hospital
☐ Discharged directly from ED to home or other location that is not an acute care hospital
☐ Left from ED AMA
☐ Died in ED
☐ Discharged from observation status without an inpatient admission
☐ Other

Not Admitted:
☒

Admit Date
 MM DD YYYY

Error but patient is not admitted and admit date is grayed out.

as complete:
Admit Date:
 Please enter a value for Admit Date.
 Q45R008
IV t-PA initiated at this hospital?:
 Please enter a value for IV t-PA initiated at this hospital?
 Z16.3
IV tPA at an outside hospital or EMS / Mobile Stroke Unit?:
 IV tPA at an outside hospital or EMS / Mobile Stroke Unit? is missing.
 Q57RA02
Patient NPO throughout the entire hospital stay?:
 Was the patient NPO throughout the entire hospital stay? is missing.
 Q57CA06
Was patient screened for dysphagia prior to any oral intake including water or medications?:
 The patient was not NPO throughout the entire

- Additional Response Option for E/M Code:** For the outpatient population the user is required to select encounter date and then an E/M code. This lists patients eligible for inclusion in the Outpatient population. A “Not an eligible E/M code” option is being added to ensure that in the rare event a patient is not admitted and DOES NOT have an E/M code on the list, an appropriate selection would be available. Again, it is not expected this will impact a large volume of cases as this would only be relevant to ASR users, who have not admitted patients who do not meet E/M criteria for inclusion.

Demographics Admin Clinical Codes Admission Hospitalization Discharge Optional Core Measures **Outpatient** Measures Special Initiatives

Historic

Patient

Encounter Date
 MM DD YYYY

E/M Code
 99281 - EMERGENCY DEPT VISIT
 99282 - EMERGENCY DEPT VISIT
 99283 - EMERGENCY DEPT VISIT
 99284 - EMERGENCY DEPT VISIT
 99285 - EMERGENCY DEPT VISIT
 99291 - CRITICAL CARE, FIRST HOUR

Discharge
 What is the date/time the patient departed from
 MM/DD/YYYY HH:MM
 MM DD YYYY HH MI

For discharges on or after 07/01/2012: What was the patient's discharge code from the outpatient setting?

Demographics Admin Clinical Codes Admission Hospitalization Discharge Optional Core Measures **Outpatient** Measures Special Initiatives

Historic