



Facility Name: _____

Date: _____

Instructions for CSC, TSC, and PSC Quarterly Data Submission

A	B	C	D	E	F	G
Quarter	# Patients Registered	# Patients ≤ 3.5hrs from LSN	# Patients treated with tPA	% Of all patients registered treated w/ tPA	% of patients presenting ≤ 3.5hrs from LSN treated w/ tPA	Median, range, and IQR door-to-needle time
Q2 2019						

Definitions:

A = Quarter – as per above formatting

B = Patients registered – number of patients evaluated in the center’s emergency department for suspected stroke (not final diagnosis of stroke, suspected stroke)

C = Patients ≤ 3.5 hrs from LSN – of the patients registered, the number of patients whose arrival time was ≤3.5 hrs from the time of last seen normal

D = Patients treated with tPA – number treated, regardless of final diagnosis

E = % of all patients registered who were treated with tPA - simple proportion, = **D/B**

F = % of patients presenting ≤3.5 hrs from LSN treated with tPA – simple proportion, = **D/C**
 - D (numerator) should exclude treated patients who present after 3.5hr from LSN
 - C (denominator) does NOT exclude patients with a documented reason for exclusion

G = Door-to-needle time, presented as median, (range), [IQR], in minutes

- Example, 50 (20-70), [35-55]; median is 50 minutes, range was 20-70 minutes, and IQR was 35-55 minutes.
- AFTER excluding patients with a patient-centered reason for delay, provide the median DTN along with the range and InterQuartile Range (IQR).

The IQR divides the data into quartiles from lowest (Q1) to highest (Q4). The 25th percentile is the median of the lower half and the 75th percentile is the median of the upper half. We use the 75th percentile as the benchmark for DTN. The easiest way to determine the IQR is to sort your



values from lowest to highest. The total number/4 would determine the value of the 25th percentile. The total number/4 x 3 would determine the value of the 75th percentile.

Patient-centered reasons for delay:

Eligibility Reasons:

- Initial refusal or delay in provision of consent
- Care team unable to determine eligibility

Medical Reasons:

- Hypertension requiring aggressive control with IV medications
- Further diagnostic evaluation to confirm stroke for patients with hypoglycemia, seizures, or major metabolic disorder
- Management of concomitant emergent/acute conditions such as cardiopulmonary arrest and respiratory failure
- Investigational or experimental protocol for thrombolysis

Reasons for delay that are **not patient-centered** and should not be excluded:

- Delay in stroke diagnosis
- In-hospital time delay
- Equipment-related delay