## **Stroke Quality Data**

MEASURE DESCRIPTION	UC IRVINE MEDICAL CENTER (January 2019 – December 2019) Higher is Better
<b>Discharged on antithrombotic therapy:</b> Antithrombotic therapy assists with reduction of formation of blood clots.	100%
Anticoagulation therapy for atrial fibrillation/flutter: Anticoagulation assists with reduction of blood clots in patients that have certain heart conditions such as atrial fibrillation.	100%
Discharged on statin medication: Statin medications assist with lowering cholesterol levels in the blood.	100%
<b>Procoagulant reversal agent for Intracerebral Hemorrhage (ICH):</b> It is important to try and stop the bleeding in the brain from a hemorrhagic stroke (bleeding stroke). Utilizing medications may help in reducing the hemorrhage (bleeding).	100%

MEASURE DESCRIPTION	UC IRVINE MEDICAL CENTER (Jan 2019-December 2019) Lower Number is better
<b>Thrombolytic therapy:</b> Thrombolytic therapy, tissue plasminogen activator (tPA), is a medication to treat ischemic stroke (caused by a clot), and the earlier it is given, the better the chance of recovery. We monitor this measure by when the patient arrives to the hospital to when we give the medication. <b>Our goal is less than 40 minutes.</b>	32 Minutes
Thrombectomy- Door to groin puncture: The earlier that a clot is removed from an artery in the brain, the better the chance of recovery. We monitor this measure by when the patient arrives to the hospital to when we access the artery. Our goal is less than 90 minutes.	89 Minutes

## What are we doing to improve:

UC Irvine Comprehensive Stroke & Cerebrovascular Center is dedicated to achieving the highest outcomes. We work continuously to improve the care and treatment of our stroke patients. Our improvement plans include constant monitoring of compliance with stroke clinical practice guidelines from the American Stroke Association. An example of an improvement plan for decreasing the delays from hospital arrival to groin puncture for thrombectomy (clot removal), is improving the process from emergency department to the angio suite.

