heart.org/getwiththeguidelines

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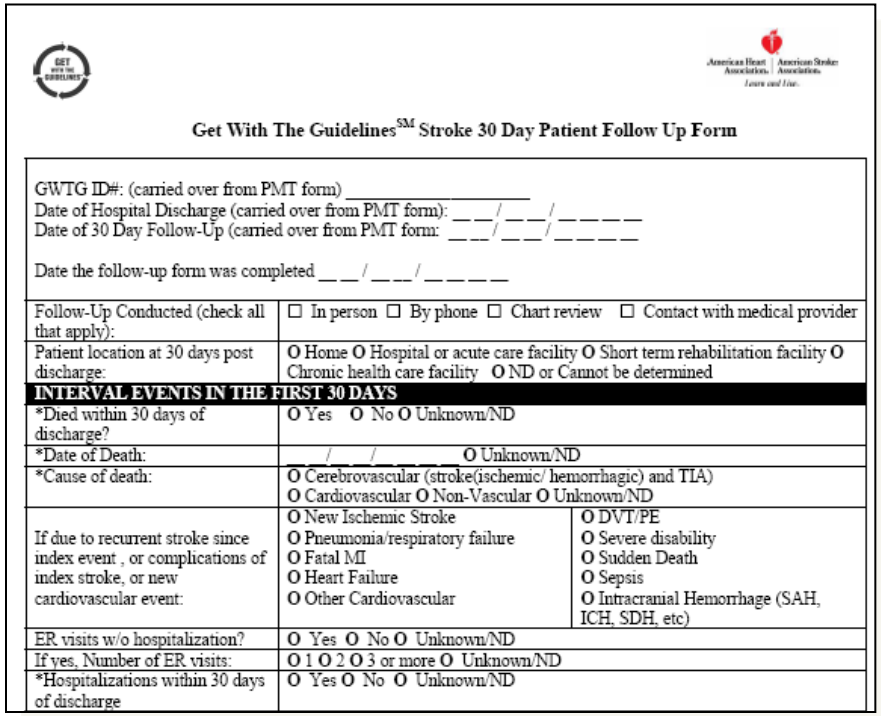
Get With The Guidelines®-Stroke puts the expertise of the American Stroke Association to work for hospital teams, helping to ensure that the care they provide to stroke patients is aligned with the latest scientific guidelines.

Stroke PMT Updates- DVT & VTE Prophylaxis

- New Achievement Measure: VTE Prophylaxis
  - A new VTE Prophylaxis measure has replaced the DVT Prophylaxis measure.
  - This change was made so as to more closely align with the STK-1 Measure: Venous Thromboembolism (VTE) Prophylaxis.
  - The current DVT Prophylaxis measure has been moved to a *Reporting* measure and has been re-titled DVT Prophylaxis (GWTG-Historic).
  - For recognition purposes, you will be allowed to submit for GWTG awards on either the new VTE prophylaxis measure or the DVT Prophylaxis (GWTG-Historic) measure for discharges through December 2012.
    - Note: sites submitting on the July 2011-June 2012 recognition cycle will need to submit on the DVT Prophylaxis (GWTG-Historic measure) as some of the data needed for the new VTE prophylaxis measure may not have been captured in entirety.

30 Day Patient Follow Up Form

- Captures patient data in the 30 day period after hospitalization
- Allows for the collection of post-discharge information in a consistent fashion
- Forms are an additional enhancement to the PMT
- Relevant fields are auto-populated
- No additional cost for use
- 30 Day Follow-Up Form content areas:
  - Mortality
  - Re-hospitalization
  - Follow-up visits
  - Medication Adherence
  - Rehabilitation
  - Patient Education
  - Other



Get With The Guidelines℠ Stroke 30 Day Patient Follow Up Form

GWTG ID#: (carried over from PMT form) _____
Date of Hospital Discharge (carried over from PMT form): __ __/ __ __/ __ __ __ __
Date of 30 Day Follow-Up (carried over from PMT form: __ __/ __ __/ __ __ __ __

Date the follow-up form was completed __ __/ __ __/ __ __ __ __

Follow-Up Conducted (check all that apply):	☐ In person ☐ By phone ☐ Chart review ☐ Contact with medical provider	
Patient location at 30 days post discharge:	O Home O Hospital or acute care facility O Short term rehabilitation facility O Chronic health care facility O ND or Cannot be determined	
INTERVAL EVENTS IN THE FIRST 30 DAYS		
*Died within 30 days of discharge?	O Yes O No O Unknown/ND	
*Date of Death:	__ __/ __ __/ __ __ __ __ O Unknown/ND	
*Cause of death:	O Cerebrovascular (stroke(ischemic/ hemorrhagic) and TIA) O Cardiovascular O Non-Vascular O Unknown/ND	
If due to recurrent stroke since index event , or complications of index stroke, or new cardiovascular event:	O New Ischemic Stroke O Pneumonia/respiratory failure O Fatal MI O Heart Failure O Other Cardiovascular	O DVT/PE O Severe disability O Sudden Death O Sepsis O Intracranial Hemorrhage (SAH, ICH, SDH, etc)
ER visits w/o hospitalization?	O Yes O No O Unknown/ND	
If yes, Number of ER visits:	O 1 O 2 O 3 or more O Unknown/ND	
*Hospitalizations within 30 days of discharge	O Yes O No O Unknown/ND	

Site-Specific In-hospital Mortality Reports

- The Get with the Guidelines-Stroke In-hospital Mortality Report presents your hospital's mortality for acute ischemic strokes, intracranial hemorrhages, and subarachnoid hemorrhages. Mortality is presented in two ways: unadjusted and risk adjusted.

- In-Hospital Mortality:

  - "Observed": # of deaths submitted by the site

total number of records – excluded records

- Risk-Adjusted Mortality Ratio: A ratio comparing the actual in-hospital mortality rate to the risk-adjusted expected mortality rate.

  -"Risk-Adjusted": death is analyzed through a statistical technique that accounts for patient-specific risk factors that could significantly increase the risk of mortality

Risk model variables

Age >60	Carotid Stenosis
Patient Arrival Mode	Diabetes mellitus
Atrial Fibrillation	Dyslipidemia
Prior Stroke	Smoking
Prior Myocardial Infarction	Date/ Time of Patient Arrival
Peripheral Vascular Disease	Stroke Type
Hypertension	

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CMS and TJC Data Submission

As you may know, starting with January 2013 stroke admissions, hospitals will be required to report this information for CMS Stroke Core Measures. This will include eight STK measures that are captured through Get With The Guidelines-Stroke. Outcome Science can submit your data already being collected through GWTG to CMS and TJC for a yearly fee.

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GWTG- Recognition Levels

Participating Hospital

Performance Achievement Awards

BRONZE = 85% Compliance for 90 days

SILVER = 85% Compliance for 12 months

GOLD= 85% Compliance each year

SILVER PLUS = In addition to 85% compliance for PAM, 75% compliance for at least 5 out of the 9 Quality Measures- 1 year

GOLD PLUS = In addition to 85% compliance for PAM, 75% compliance for at least 5 out of the 9 Quality Measures- 2 years

Award Recognition

GWTG Performance Achievement Award Hospitals will be recognized in US News and World Report and International Stroke Conference this winter.

2011-2012
GWTG Performance Achievement Award Hospitals

Certificates:

- ✓ Sacred Heart Hospital- Silver Plus
- ✓ Hazelton General Hospital- Gold Plus
- ✓ Holy Redeemer- Gold Plus
- ✓ Mercy Philadelphia- Gold Plus
- ✓ Paoli Hospital- Gold Plus
- ✓ St. Joseph’s Hospital- Gold Plus
- ✓ The Reading Hospital and Medical Center - Gold Plus/Target Stroke
- ✓ Doylestown Hospital-Gold Plus
- ✓ Lehigh Valley Health Network- Cedar Crest- Gold Plus/Target Stroke
- ✓ Lehigh Valley Health Network- Muhlenberg- Gold Plus