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Media Contact: Kim Savage
Phone: (941) 917-6271
Pager: (941) 252-8101

Sarasota Memorial Named Primary Stroke Center

With national certification, SMH now seeking state recognition as preferred provider in the region

SARASOTA – The Joint Commission on Accreditation of Healthcare Organizations awarded Sarasota Memorial Hospital “Primary Stroke Center” certification with distinction this week, paving the way for the public hospital to become the state’s first preferred provider for stroke patients in the tri-county area.

Once reviewed by the state Agency for Healthcare Administration (AHCA), the national designation as the region’s primary stroke center will mean that patients suffering stroke symptoms in Manatee, Sarasota or DeSoto counties soon could be transported by ambulance directly to Sarasota Memorial, rather than the closest hospital.

“Earning certification as a Primary Stroke Center is the Joint Commission’s “Gold Seal of Approval,” said Mauricio Concha, MD, stroke neurologist and medical director of Sarasota Memorial’s Stroke Program. “It means that we have the specialized knowledge, skills, technology and resources in place to provide people in our community with the best possible stroke care.”

To earn certification as a Primary Stroke Center, Sarasota Memorial underwent an extensive on-site review by the Joint Commission last month that evaluated all aspects of care to stroke patients, from the emergency room and intensive care units to acute stroke care and rehab nursing units. Among other things, the Joint Commission surveyor audited charts, talked to former patients and randomly interviewed physicians and staff about their knowledge of stroke and protocols they follow to care for patients exhibiting signs and symptoms. During the daylong survey, the hospital received two stroke alerts from paramedics, allowing the examiner to watch the hospital’s stroke team in action.

Sarasota Memorial’s stroke program includes a multidisciplinary team of physicians from emergency medicine, neurology, neurosurgery and interventional radiology as well as nursing and rehabilitation services, pharmacy, radiology, food & nutrition and social workers.

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To earn certification, hospitals must demonstrate their stroke care program follows national standards and guidelines that can significantly improve outcomes for stroke patients.

“This certification means Sarasota Memorial Hospital does the right things and does them well for stroke patients,” said Charles Mowll, executive vice president of Business Development, Government and External Relations for the Joint Commission.

The hospital received notification from the Joint Commission by letter on Tuesday, and sent an application and affidavit to AHCA on Wednesday asking to be added to the state’s list of Primary Stroke Centers. Only 18 of the state’s 285 hospitals have earned such exclusive designation from the joint commission.

Florida is one of several states using Joint Commission certification as a means to designate preferred providers of primary stroke care. Once a hospital is added to Florida’s list of Primary Stroke Centers, state law and a pending administrative rule will give paramedics and emergency medical technicians the right to bypass closer hospitals and take stroke victims straight to Sarasota Memorial. For those who can communicate their preferences, Sarasota Memorial can be recommended as the preferred provider in the region, said Associate Chief Nursing Officer Sharon Tolhurst, who oversees the hospital’s stroke program.

About Sarasota Memorial

The nation’s No. 3 cause of death, stroke is a major focus for Sarasota Memorial.

The hospital has worked closely with Emergency Medical Services (EMS) to develop a “Stroke Alert,” which includes protocols for pre-hospital care of stroke patients and the speedy transport of these individuals to the hospital.

Patients who meet certain criteria typically must be given a special clot-busting drug, t-PA, within three hours of a stroke to help prevent brain damage. Studies show that stroke patients treated with t-PA leave hospitals sooner and require less rehabilitation and nursing after discharge than do patients who do not receive the drug.

In the past year, through education and the new protocols, Sarasota Memorial has increased the percentage of patients given t-PA from .2 percent to 5 percent, well above the national average of 2 percent.

And now the hospital’s new Neurointerventional Radiology Program extends the window of time in which t-PA can be given to six hours, since neurointerventional radiologist Kirk Conrad, MD, can thread a catheter through the artery to the brain and administer the drug directly to break up the stroke-causing clot.

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Sarasota Memorial also is participating in more than five research trials, some offering treatment options up to 10 hours after onset of stroke symptoms. “We are collaborating in several of the most important research trials for stroke usually available only in top academic stroke centers around the country,” said Dr. Concha, principal investigator for the trials.

Sarasota Memorial is leading the region in the use of other advanced treatments as well. The organization currently is the only hospital between Tampa and Miami to use therapeutic endovascular hypothermia to treat selected stroke and cardiac arrest patients. The advanced protocol lowers a patient’s body temperature to help decrease cell death and improve neurological outcomes.

Sarasota Memorial’s stroke program is an integral part of the organization’s Neuroscience Center of Excellence, which encompasses all of the health system’s neurological programs and services.

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