# Virginia Stroke Systems Task Force

Quarterly Meeting (Virtual) January 14, 2022 10:00 AM - 12:00 PM



#### Introductions

Please insert the following into the chat box to let your colleagues know you are here:

Name, Title, Organization/Hospital, City/County



### Virtual Housekeeping

- Participants will be muted automatically at the start. Please remain on mute for the duration of the meeting, unless speaking.
- Please turn your camera on! It's always nice for the speaker to be able to see faces instead of talking to a bunch of blank squares.
- Open the chat box so you can view the discussion and ask any questions of the speaker. The chat box will be monitored by meeting hosts to ensure the questions are brought to the speakers attention.
- If you want to speak to contribute to the conversation or ask a question, please use the "raise hand" feature found along the bottom of the participants box.
- If joining the meeting over the phone only, you can mute and unmute yourself by pressing \*6 on your phone's keypad.

### Agenda

- Agenda: 10:00AM: VSSTF Business
  - Pankaja Ramakrishnan, MD | Riverside Regional Medical Center and
  - Chad Aldridge, PT, DPT, MS-CR, NCS | UVA Medical Center
- 10:15AM: Panel Presentations Intersection of Cardiovascular Disease and Stroke: PFO Closure, Linq, Brilinta
  - Dr. Matthew Chung, Dr. James Garnett, and Victoria Collins | WL Gore and Associates (PFO Closure)
  - Dr. John Venditto, AstraZeneca US Medical Head Cardiovascular & Thrombosis Cynthia Piques | AstraZeneca (Brilinta)
  - Patrick Cunningham | Medtronic (Linq)
- 11:20AM: Accelerating Access to Mechanical Thrombectomy with Public Health Tools: In Your Community and Globally
  - Dileep R. Yavagal, MD, MBBS, FSVIN, FAAN, FAHA | Professor of Clinical Neurology and Neurosurgery, Director Interventional Neurology, Co-director Endovascular Neurosurgery, Director Neurological Stem Cell Platform, Interdisciplinary Stem Cell Institute | University of Miami & Jackson Memorial Hospitals
- 11:50AM: CDC Paul Coverdell National Acute Stroke Program Updates
  - Patrick Wiggins, MPH | Virginia Department of Health
  - Kathryn Funk, AGACNP-BC | Virginia Department of Health
- 12:00PM-1:00PM: Virginia Stroke Coordinators Consortium Meeting (Contact Kimberly Pinna and Laurie Mayer for more information)



#### **VSSTF Business**

VSSTF Co-Chairs: Pankajavalli Ramakrishnan, MD, Riverside Regional Medical Center and Chad Aldridge, PT, DPT, MS-CR, NCS, UVA Medical Center

Next Meeting Date: April 15, 2022

Nominations for 2022

Stroke Smart Virginia Updates (Alan Stillman)



### **Nominations for 2022**

#### Open Position:

- VSSTF Co-Chair
  - ► Two year term
  - Elected by VSSTF voting members

#### Roles and Responsibilities:

- The VSSTF Co-Chair shall provide strategic direction and leadership for the VSSTF.
- The VSSTF Co-Chair must attend and facilitate VSSTF quarterly meetings.
- The VSSTF Co-Chair shall collaborate with the other VSSTF Co-Chair, VSCC Co-Chairs, VDH representative, and other members of the VSSTF planning team to ensure proper planning of meetings (Biweekly/monthly conference calls), represent interests of VSSTF members, triage member correspondences for streamlined communication, and facilitate the nomination process.

#### **New Co-Chair Nomination Requirements**

- NEW REQUIREMENTS: (1) Licensed physician, nurse, or any professional / allied health professional with experience and expertise in stroke care. The physician can be a neurologist, emergency physician or another specialist, but must have experience and expertise in diagnosing and treating cerebrovascular disease. The nurse can be a stroke coordinator or member of a hospital's acute stroke team. The professional / allied health professional can include the following, but is not limited to, an EMT/Paramedic, physical therapist, or speech language pathologist. (2) Must actively participate in VSSTF quarterly meetings.
- Note: Between the two VSSTF Co-Chairs, one VSSTF Co-Chair must be a physician or nurse. If the outgoing Co-Chair is a physician or nurse and the other Co-Chair is not a physician or nurse, then the eligibility requirement holds that only a physician or nurse can be nominated. If both Co-Chairs are physicians or nurses, or the outgoing Co-Chair is not a physician or nurse, then the expanded eligibility requirements go into effect.



### **Timeline for Nominations**

- Nomination REDCap survey will be sent the week of January 24, 2022. Deadline to nominate is February 21, 2022. Any VSSTF member can nominate!
- Voting members will elect the new VSSTF Co-Chair from the list of eligible nominees.
- New VSSTF Co-Chair will be announced at the April 15, 2022 meeting.

## **Stroke Smart Virginia Proclamation**



#### CERTIFICATE of RECOGNITION

By virtue of the authority vested by the Constitution of Virginia in the Governor of the Commonwealth of Firginia, there is hereby officially recognized.

#### STROKE SMART COMMONWEALTH

WHEREAR, I is a prophy will have a stude in their history, and \$175. of institute an effected, and WEEREAS, or the tracking same of long-over-itrativity, putting a transmitter from the border and Section and

WEEKAL Source and the section responses that must be placetorized within 1.1 from each transmiss of a struct length and

WRERGAN, shows assure we first than has not equivalence charged for the ball of every with the experient of program because they be used a study of the incontence of carling WT respectively, and

WHEREAS, Vegator's paths and private scheme will be encouraged to mate limits. Tenne limits, Tenp-orlands Special (2), part of door reasons for all materia, limity, and function; and

WHEREAS all built and adds for any other to be a breach, they a reaction provides. Such approach, planning has IAS, public adds, these forvers and the Department of a jugs and the Vegelo foreign dynamic has been of the expert to perform to provide a difference of the Composition of a spin of the Vegelo foreign of provides and the provide the termination of the Composition of the Vegelo foreign of the Vegelo foreign of the termination of the spin of the termination of the Composition of the Vegelo foreign of the Vegelo foreign of the termination of the spin of the termination of the termination of the Vegelo foreign of the Vegelo foreign of the termination of terminatio

WEEREAS, because on a separation, solar connection, labeled approaches, and reaches an encourage participes and complete a the lowler forset. Some Senie, Some Senie, have selling angulge transport to approach

STREET, MARKEN, MARKING, MARKI and to be observe everyone to the Community of Verysian deal deals assume that the bary bare baseds, which will reduce the second of monto-to-411 instruction be recommend by 2044 and load longered Saling 312 true TAXABLE AND

WHERE AS Vegets begins to array to a model for affect committies, affect constitute committee whether affect and the same

NOW, THEREFORE, I. Raph 5, Norman, or produce the COMMONWEAL DE OF EMPOPULA & STROKE EMART COMMONWEALTH, and I will the distribution of the adjustment of all out streams.



WHEREAS, businesses, civic organizations, senior communities, faith-based organizations, and residents are encouraged to participate and contribute to the Stroke Smart: Spot-a-Stroke, Stop-a-Stroke, Save-a-Life campaign through active citizenship efforts: and

WHEREAS, the goal is to educate everyone in the Commonwealth of Virginia about stroke recognition and the importance of dialing 911 immediately, which will reduce the onset of stroke-to-911 interval to be measured by EMS and local hospital systems; and

WHEREAS, Virginia hopes to serve as a model for other communities, cities, counties, commonwealths, states, and the nation, thereby advancing the vision of a Stroke Smart America:

NOW, THEREFORE, I, Ralph S. Northam, do proclaim the COMMONWEALTH OF VIRGINIA a STROKE SMART COMMONWEALTH, and I call this observance to the attention of all our citizens.



X-fl S North Governor

ely homass Secretary of the Commonwealth





# Stroke Smart Virginia Governor Northam Call to Action Video





#### VSSTF Stroke Smart Virginia

- TREATMENT: Within the Stroke Belt, ONLY 3.8% of patients received tPA (564,000 Ischemic over seven years).<sup>1</sup>
- DELAYED ARRIVAL: Up to 75% of patients arrive after the tPA window closed.<sup>1</sup>

**GOLDEN HOUR:** In Norway, 73 patients receive tPA in the Golden Hour. <u>All 100% have NIHSS of 0 at discharge.</u><sup>2</sup>

<sup>1</sup> <u>https://www.sciencedaily.com/releases/2017/02/170223092338.htm</u>

<sup>2</sup> <u>The golden hour of acute ischemic stroke (biomedcentral.com)</u>



#### VSSTF Stroke Smart Virginia

#### YOU are invited to join Stroke Smart VA Working Group!

Community Education Focus

Stroke Sign Recognition

Need to call 911

Alan Stillman <u>alan@Kwikpoint.com</u>

Patrick Wiggins patrick.wiggins@vdh.virginia.gov



