Neuroscience Network Quarterly Newsletter
June, 2013

Featured Story

Dr. Rosenwasser and other members of the Jefferson team attended a meeting with the Pennsylvania Secretary of Health in Harrisburg recently to discuss formation of a Pennsylvania telemedicine consortium. The proposed goal of the consortium is to provide telehealth services for time sensitive diseases to rural communities within the Commonwealth. Forty-eight of Pennsylvania’s 67 counties are rural; only 6 of these counties have hospitals designated as primary stroke centers. Jefferson was asked to present an overview of the Jefferson Neuroscience Network and our telestroke experience to a group that included representatives from 4 other Pennsylvania medical centers. A follow-up meeting is scheduled for July.

Featured Case

In May, 2013, a man in his 40’s presented to our network partner, Mercy Suburban, with an acute stroke. His NIHSS was 20. A JET consult was initiated and IV tPA was recommended by the Jefferson physician. Mercy Suburban administered IV tPA and made a decision to transfer the patient for consideration of additional treatment. Upon arrival to Jefferson Hospital for Neuroscience’s INR unit, a stat CTA/CTP was completed. Based upon the results of this test, it was determined that this patient was a candidate for additional stroke interventions; a clot was located in the L MCA. Mechanical lysis was performed using the Solitaire device and the Penumbra Aspiration system. Patient was admitted to the NICU and had a positive recovery course. He was discharged within six days from the stroke unit with a NIHSS of 2. Excellent example of a collaborative team effort; from EMS to network hospital to tertiary center; all of these areas together impacted this patient’s outcome. Great job!
JET Protocol Best Practice

Reminders:
- ED ATTENDING physician must evaluate patient before consult is requested.
- CT Scan should be resulted before consult is requested.
- Patient information must be entered in Stroke Respond before JET consult activation.
- Robot should be placed outside patient room until Jefferson telemedicine physician beams in.

Hospital Inservices on Telemedicine/JET consult at the network site can be offered to staff on a quarterly basis or more if necessary. Please contact Maureen DePrince, RN, BA, CCRN to arrange a program for your hospital at Maureen.deprince@jeffersonhospital.org or 215 503-9959

Transfers

For patients being transferred for consideration of mechanical lysis or chemical lysis:
- Please consider inserting a foley catheter prior to transfer.
- Please ensure that patient is in hospital gown and all other clothing is removed prior to transfer

Patient is typically transferred directly to the INR suite and these efforts will assist with timeliness to treatment.

Education

SAVE THE DATE! The next Neuroscience Lunch & Learn will be on Thursday, October 17, 2013
10am – 230pm @ Wills Eye Institute, (Across the street from Jefferson Hospital for Neuroscience)
Lunch provided. Program is FREE to Network members! Registration will be available online beginning August, 2013.

Don’t forget the Knowledge Portal! – More than 50 neuroscience lectures available on-line. Staff can watch the video independently or hospital can host an airing at your site. All of these lectures have been part of a CME or CNE activity at Jefferson. These programs will count towards a stroke education activity as defined by Joint Commission. Visit the website for a list of programs or contact Maureen DePrince for more information. www.jeffersonhospital.org/stroke
Neuroscience Network Quarterly Meetings

Members from Jefferson's telemedicine team and the Network hospital's Leadership team meet on a quarterly basis. During this meeting important information is shared and discussed and a report like the one listed below is provided but it is individualized to each of our network hospitals.

<table>
<thead>
<tr>
<th>JET Consults</th>
<th>Jun-12</th>
<th>Jul-12</th>
<th>Aug-12</th>
<th>Sep-12</th>
<th>Oct-12</th>
<th>Nov-12</th>
<th>Dec-12</th>
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<tr>
<td>JET Consults Remaining</td>
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<td>36</td>
<td>30</td>
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<td>1</td>
<td>2</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>1</td>
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</tbody>
</table>

Quality Outcomes

Quality and Safety are the top priority for all Jefferson staff. We are continuously working on developing a culture of safety, quality and collaboration and include patients and their families as key partners in these efforts. We encourage you to visit these sites at the following addresses to get more quality information.

http://www.jeffersonhospital.org/diseases-conditions/stroke/our-outcomes
http://www.jeffersonhospital.org/quality-and-safety/reports

tPA Verification Form — This form (see sample below) is sent to our network partners on a quarterly basis. Jefferson validates whether or not tPA was administered to patients that we provided a consult for and recommended treatment with IV tPA. It is important that this information is verified and sent back to Jefferson in a timely manner.
**TPA VERIFICATION FORM**

**Stroke Respond** - is the clinical data collection tool (software) that accompanies the robot (hardware) and is a critical part of a JET consult. Stroke Respond is loaded on to the desktops at our network hospitals. You will either find it as an icon or through your intranet applications. Another option for locating Stroke Respond is to type in this URL address in your browser: https://stroke.intouchcustomer.com/

Best Practices r/t Stroke Respond
- Always have a patient record entered in Stroke Respond prior to activating a JET Consult.
- Include Patient demographic, clinical presentation, vital signs & lab results
- Don’t forget to print out the JET consult for the medical record.

**Robot Cleaning & Maintenance** – It is recommended that the outer surfaces of the Robot be cleaned regularly. This should be done on a weekly basis or more when visibly soiled or dusty. To clean the monitor, use a LCD computer screen cleaner to prevent staining. A soft dry cloth can be used to dust the robot. If there is a contaminated surface, make sure the robot is unplugged and the power is OFF, and use a sani-wipe or damp clean rag to wipe surfaces that have become soiled. Avoid excess solution which may enter the robot through its openings. Allow to air dry and turn back ON. A Robot Cleaning and Maintenance guide was provided to all network partners. If you do not have one, please contact Maureen DePrince and she will provide you with a new one.
Technical Support Center (TAC) - Occasionally technical support is needed for either the hardware (robot) or the software application (Stroke Respond). The TAC number can be found on the “face” of the robot, or on the back of the robot. Contact for TAC support is 1-877-484-9119.

Please contact Maureen DePrince for questions related to this newsletter or if you would like to feature a case or special event from your hospital in our next edition.
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