

# Georgia Coverdell Acute Stroke Registry Quarterly Newsletter



**SUMMER 2014** 

# Coverdell Partners:

Georgia Department of Public Health (DPH)

**Emory University School of Medicine** 

Georgia Medical Care Foundation (GMCF)

American Stroke
Association (ASA)

Georgia Hospital Association (GHA)

If you have
anything you would
like included in an
upcoming
newsletter or have
achieved recent
recognition in the
area of stroke,
contact:

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or

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## GCASR Presents Award of Distinction to Retired Paramedic-David Loftin



(Pictured above at the Annual EMS Banquet, from left to right: Keith Wages, Director, Office of EMS and Trauma, GA DPH; David Loftin, Award Recipient, Retired Paramedic; Kerrie Krompf, GCASR Hospital and EMS Coordinator; James Lugtu, GCASR PI and QI Director; Harris Blackwood, Director, GA Governor's Office of Highway Safety; Courtney Terwilliger, GA Association of EMS Chairman)

When we look at people who have spent a lifetime creating systems of care that benefit patients in the State of Georgia, including Stroke Care, one name stands out. Mr. C. David Loftin, BS, Paramedic who has spent close to 40 years doing just that. Mr. Loftin has been instrumental in creating a statewide system of stroke care by developing and leading initiatives that improve the pre-hospital community's recognition and treatment of stroke care.

Mr. Loftin came to EMS in 1974 as a result of having to render first aid as an industrial chemist in a local plant in Rome. He completed an EMT course and was hired by Floyd County Ambulance Service (now known as Floyd Medical Center EMS) in Rome, GA. In 1978 he became the first paramedic in Floyd County and assisted in the first few courses to train other employees. He was hired to develop a plan to establish a regional EMS System in the 16 counties of northwest Georgia and to write a federal grant to fund the development of the system in 1980. The grant awarded \$400,000 and the development phase began. Within 10 years, all emergency calls in the 16 counties were answered by paramedic staffed crews as a result of this grant.

He became the regional training coordinator during this period of time and began establishing cardiac, trauma and pediatric courses in the region. In 1987 TPA was first used for heart attack patients and in 1989 he lobbied the Composite State Board of Medical Examiners to approve a program to allow Redmond Regional Medical Center EMS to administer TPA in the field. The approval was given and Redmond Regional Medical Center EMS became the first EMS Service in Georgia to give TPA in the field.

In 1995 NINDS published a research study paper on the use of TPA in acute ischemic strokes and in 1998 the University of Miami began the Advanced Stroke Life Support (ASLS) course to train medical professionals in this new treatment for strokes. In 2000, United States Senator Paul Coverdell died from a stroke and at the same time the American Heart Association gave TPA a class 1 recommendation for use in acute ischemic strokes. As a result of Paul Coverdell's death, and this recommendation by the American Heart Association, the Centers for Disease Control began a grant program to implement state stroke registry programs. Georgia received this funding to establish the Georgia Paul Coverdell Acute Stroke Registry in 2002, which David has been active with this entire time. Also during this timeframe, The Medical College of Georgia in Augusta (now known as Georgia Regents), began a stroke telemedicine program called the REACH program (2003) and the American Heart Association began sponsoring candidates to attend the Miami Advanced Stroke Life Support program. David Loftin was one of the first 5 people from Georgia to attend this program in 2005. As a result, he arranged an ASLS instructor program for hospital personnel in 2006 within the 16 county area comprising Region 1/Northwest Georgia EMS. Over the next 4 years (2006-2010) David, with the assistance of other instructors, taught at least one ASLS program in every one of the 16 counties in Region 1.

In 2008 the Georgia legislature passed the Coverdell-Murphy Act which was designed to create a state-wide system to address the higher numbers of strokes in Georgia, which lies directly in the stroke belt. The act developed 9 objectives to address. One of the objectives was the creation of remote stroke treatment centers modeled after the REACH program. David Loftin was a member of both the American Heart Association Stroke Advisory Committee and the Georgia Stroke Advisory Committee which merged in 2010 to create this state-wide stroke system in Georgia.

In 2010, Mr. Loftin's accomplishments were highlighted in the <u>National Center for Chronic Disease Prevention and Health Promotion/Division of Population Health</u>
(http://www.cdc.gov/phhsblockgrant/states/pdfs/georgia.pdf) Mr. Loftin had the article published by the Centers for Disease Control in support of CDC Stroke Grants to Georgia. By 2011 all but one of the nine objectives had been achieved in the plan, including establishing the regulatory mechanism to designate remote stroke centers. David wrote the drafts for the statewide EMS Stroke Screening Field template, collaborated on the Stroke Policy and Protocol for the State Office of EMS & Trauma, and has been instrumental in all pre-hospital stroke systems of care for many years. David wrote the grant which funded this project. He also spearheaded the movement to garner support and involvement in the initiative from all stakeholders. He has always been respected by not only the pre-hospital community, but all healthcare partners in Region 1. His drive, ability to fully research and vet a project, is well known among several groups statewide.

In 2012 the Office of EMS and the Georgia Coverdell Acute Stroke Registry held a meeting to coordinate their efforts in Gainesville, Georgia. Mr. Loftin was recognized at the meeting approving the regulations to designate remote stroke centers as an integral part of the effort.

In 2013 the Miami School of Medicine released their revised ASLS (Advanced Stroke Life Support) Instructor program in Georgia. Mr. Loftin was one of two EMS professionals chosen as an ASLS Instructor-Trainer in Georgia. Since then he has participated in two ASLS Instructor programs sponsored by the Georgia Coverdell Acute Stroke Registry. One at the American Heart Association's Southeastern Affiliate Office in Marietta, Georgia, the other at the EMS Educators Conference in Savannah, October 2013.

David Loftin retired on December 31, 2010 but he continues to work with the committee on improving stroke care statewide. His passion for improving patient outcomes for all systems of care is still evident three (3 1/2) years after his retirement. He is still active in Region 1 EMS by leading stroke education, serving on the regional trauma advisory committee and continuing to be the recording secretary for the Regional EMS Advisory council.

There may be those in other disciplines that have been great champions of, or developed significant treatment systems for stroke care, however it would be hard pressed to find someone that has touched the frontlines of stoke care more than Mr. Loftin. After all, the first line of care is the EMS Community. With David's unswerving dedication, many stroke patients might have been missed by the pre-hospital providers, if not for his vision, instruction and participation.

Above Nomination Submitted by: David T. Foster III, MLS, Paramedic, Region 1 Program Director, Georgia Office of EMS and Trauma

## Recognition of Coverdell Hospital Stroke Month Activities and Success Stories

#### **EMORY SAINT JOSEPH'S HOSPITAL ATLANTA**

Members of the Emory Saint Joseph's Hospital Stroke Advisory Committee participated in various community outreach events. The team provided stroke education and distributed FAST cards/magnets at local assisted living facilities. In addition, members of the stroke committee and nurses from the neurovascular unit educated visitors and employees at a community outreach event at the hospital. The neurovascular unit purchased a pull-up banner, which was displayed during the community outreach events. The banner will be displayed throughout the hospital during the course of the year. The Emergency Department created visual reminders regarding assessments and stroke alert process times for EMS providers by using a baseball theme. Finally, Emory Saint Joseph's Hospital employees collaborated with Emory University Hospital Midtown (EUHM) and provided blood pressure screenings and stroke education at the EUHM stroke fair. We had a great Stroke Awareness Month!

Submitted by Dee Lacey. Stroke Coordinator, Emory Saint Joseph's Hospital Atlanta

#### **EMORY UNIVERSITY HOSPITAL (EUH)**

The Stroke Program at EUH was excited to report on their happenings for Stroke Awareness Month 2014. The community outreach fairs continued strongly, and included health screenings and stroke education with their interdisciplinary care team servicing local churches, schools, public libraries, and even the Atlanta Human Performance Center. Their outreach continues to span metro-Atlanta, with their teams active in the cities of Atlanta, Red Oak, Lithonia, Loganville, Decatur, Norcross, and Jonesboro, GA.

The stroke program leadership team coordinated two stroke awareness fairs in May, where they screened blood pressure and blood glucose, and even incorporated their Neurologists, Neurology Nurse Practitioners, Dieticians, Physical Therapists, and Occupational Therapists for a "Talk with a Specialist" series, in which participants could speak one-on-one with specialists regarding specific risk factors and counseling on reducing their risk for stroke and cardiovascular disease. Their goals were to aid people in knowing their numbers, identifying their risk factors, and formulating action plans for success in reducing their risk for stroke

May was a plentiful (and busy) month regarding education for staff and visitors. The team hosted the following lectures related to stroke prevention and management:

Stroke Prevention: It Takes A Village presented by Aaron Anderson, MD Stroke Rehabilitation: What Do We Know Now and Where Are We Going? Presented by Samir Belagaje, MD

Stroke Prevention: Because a Mind is a Terrible thing to Waste presented by Lauren Ayala, DNP and Debra Blanke, APRN

Nutrition Recommendations for Cardiovascular and Cerebrovascular Health presented by Michelle Gooden, RD, LD

These lectures were attended by 130 staff and visitors of Emory Hospital, Emory Midtown, and Emory Center for Rehabilitation Medicine. Continuing education credit and Stroke hours were offered for all in attendance.

The program also began re-offering Advanced Stroke Life Support (ASLS) classes to Emory Hospitals and EMS affiliates in May 2014. Joshua Dunn and Cyndy Brasher led the inaugural 2014 class. They had 18 people in the class representing Emory Hospital, Emory Midtown, Emory Center for Rehabilitation Medicine, Grady EMS, AMR EMS, and DeKalb EMS. Emory University hospital continues to provide ASLS monthly and welcome anyone interested in ASLS certification to join.

Through the outreach efforts so far in 2014, they screened and provided stroke awareness education to over 500 people – and counting! That would not be possible without the commitment and passion from the Patient & Family Education Committee (PFEC), ICU Education Committee, and hospital-wide stroke leadership team. The group of consistent volunteers that drive stroke awareness consists of about 30 dedicated RNs, NTs, NPs, who lead the way.

Submitted by Joshua Dunn, Stroke Coordinator, Emory University Hospital

#### **HAMILTON MEDICAL CENTER**

Time is key when having a stroke. Hamilton Medical Center associate receives life-saving, brain-saving treatment. Brenda Brooks, physical therapy assistant for Hamilton Medical Center (HMC) was spending time with J'Dun, her 9-year-old great grandson, when he noticed that something was wrong.

Brooks had facial droop, weakness on her right side and speech problems. J'Dun recognized these as symptoms of a stroke because he and Brooks had been learning them from a FAST (an acronym standing for face, arms, speech and time) magnet that Brooks has on her refrigerator. J'Dun called 911. "Hurry up. My great grandmother is having a stroke!" he said to the 911 operator. "I am so glad that J'Dun and I were studying the stroke signs from the FAST magnet," Brooks said. "He was the one who saved my life!"

Hamilton Emergency Medical Services called a Code Stroke from the field, and Brooks was rushed to the HMC Emergency Department. She was rushed to get a CT scan.

Juan Gonzalez, MD, was on call and ordered tissue plasminogen activator (TPA), a brain-saving drug. Brooks received the drug 37 minutes after her arrival to the Emergency Department. Her stroke symptoms began to resolve quickly.

The following morning, she had an MRI of the brain that revealed no tissue damage. Timeliness of administering the drug helps prevent brain tissue from dying.

"I could not have any better care," said Brooks. "Because 911, EMS and the ED (Emergency Department) communicated quickly and well, the Code Stroke was enacted, and my life was saved. The staff members work hard for you as a patient."

Brooks was discharged less than 48 hours after arrival to HMC. She was back at work by the fifth day with no residual issues from the stroke.

HMC recently received The Joint Commission's Certificate of Distinction for Primary Stroke Centers. This distinction recognizes centers that make exceptional efforts to foster better outcomes for stroke care.

"If you see the signs of stroke, don't delay in calling 911 and letting them know that you are having signs of a stroke," Brooks said. "Also, talk to your family and friends and ensure they know the signs of a stroke as well. They just might save your life."

Submitted by Hannah Jones, Stroke Coordinator, Hamilton Medical Center

#### **ATLANTA MEDICAL CENTER**

AMC Staff Hopes to Save Another Life at Richardson Brothers Group White Linen Gala. Donnis Prater knew he was having a stroke. He knew it because his brother had died of a stroke in 2012. And only a few months before, he had heard Debbie Camp, RN, AMC's stroke program manager, describe the symptoms of a stroke at the White Linen Gala, a fundraiser his family held in his brother's honor. Because he remembered Debbie's talk, he got to a hospital immediately and is now doing well.

This year, Debbie Camp spoke again at the White Linen Gala for Diabetes & Stroke Health Awareness, held on April 26. She was joined by Lisa Weaver, RN, stroke coordinator.

Debbie told the attendees: "You can continue to lose each other or you can continue to support each other. This is your family."

The White Linen Gala is a community education outreach event/fundraiser. The Richardson family began this annual event last year, after one brother died from type 1 diabetes, and another brother died of a stroke.

"I wanted to do something because I needed to try to replace this pain that I was having, and to do something that would be useful to other people," says Marjorie Richardson, who is Donnis Prater's sister. "In the African-American community, we really don't know that much about the diseases we have."

Strokes are 80 percent preventable, though, if we take care of ourselves. This is the message that Debbie delivered at the event. And people were paying attention, says Marjorie Richardson.

"Your team had our full attention," she told Debbie. She said people decided to forego the cash bar because Debbie told them they should limit their alcohol intake.

Debbie says: "Sometimes you wonder are you really making a difference, and it does make a difference when you get out and talk to people. They are making lifestyle changes, and they are making each other accountable. "Truly understand that you can prevent strake"

Marjorie says that she is happy to have AMC participation and is hopeful for continued future participation.

In addition, to the White Linen Gala, AMC held many other activities during stroke month.

Atlanta Medical Center started the May Stroke Month activities by providing stroke education and prevention strategies to several local Senior High Rise Centers as part of their Healthy Living Series. Community outreach continued with the Stroke Coordinators and staff members participating in health fair events at churches and community associations. The Stroke Coordinators also attended the second annual White Linen Gala for Stroke Awareness, which was sponsored by a family who had lost two brothers to stroke. FAST cards were shared at the events listed above along with the Stroke Risk Assessment tool and a plan on

how to modify risk factors. AMC's Interventional Neurologists, Dr. Grigoryan and Dr. Naravetla, conducted several Lunch and Learns (in-house and in the community). There was a Sunday morning televised program on Stroke prevention and recognition that was sponsored by Atlanta Medical Center.

Stroke Education/Awareness and prevention continues with the employees at AMC. FAST posters, table toppers, cards, and magnets are located throughout the facilities. The Stroke Coordinator(s) participate in new employee orientation delivering an overview of stroke education and monthly ASLS classes continue to be provided for the staff at AMC. Additional ASLS classes were offered to outside agencies that included EMS, EMS students, and nursing students.

It was an extremely busy month and it doesn't stop in May, education and outreach continues throughout the year!

Submitted by Debbie Camp, former EBM and Lisa Weaver, Stroke Coordinator, Atlanta Medical Center

#### **SPALDING REGIONAL HOSPITAL**

Spalding Regional's Jennifer Rodman Makes a Really *Good Catch!* On Saturday, February 22<sup>nd</sup>, Robert Myers came to visit his wife in our hospital. His morning started out normal, until he stopped at McDonalds for breakfast. "My hands began shaking so bad I could hardly carry my bag and my head started hurting bad." Dismissing his symptoms as hunger due to missing breakfast, he headed to the hospital. Approaching the hospital his vision blurred, almost causing him to run off the road. He also seemed very weak when walking in the hospital and had to hold on to cars in the parking lot to get to the entrance. Again, he still felt all of these symptoms were from hunger and couldn't wait to get to his wife's room to eat. He just told himself "I can make it, I can make it."

Once in her room, he sat down to wait while her nurse, Jennifer Rodman, took his wife's vital signs. Jennifer noticed that Mr. Myers did not look well and asked him how he was feeling. He thought he was muttering that he was out of sorts, but Jennifer "suddenly got on her little phone and made a call and then turned all her attention to me." Even though Jennifer was not a Stroke Unit nurse, as part of the Spalding Regional Health team Jennifer is trained to recognize the F.A.S.T signs, and especially noticed his speech, and made a MET call for a Code Stroke. Within minutes others arrived with a wheel chair and Mr. Myers was off to the ED.

Once there, he was whisked into radiology for a CT scan. "That ED doc kept reminding everyone about time constraints to give me some special medicine (tPA). I knew I was in good hands." Shortly after, the ED physician told him he had had a stroke, but he wanted another physician to look at his results before they started treatment "Well they brought in a TV screen and there was a doctor on that screen who said 'hello Robert.' That doctor was in South Carolina, but knew me and all about me. I had no idea the hospital had that type of technology."

He explained to Mr. Myers that a clot had formed in his brain and what they wanted to do about it, which was "administer that special medicine that would turn my blood thinner than water and allow that clot to dissolve." Mr. Myers wanted to know the risks, but at this point he could no longer speak and wasn't making sense "but that doctor knew what I wanted to know, what my chances were." He explained the risks of tPA, including hemorrhaging and even a possibility of death. "But he also told me the risks and options if we did not start this, and quickly." He then told me another physician would be in to answer any more questions for me and get everything started.

That's when Mr. Myers met Dr. Gary Rzeznik who explained to him that he was fortunate to be in the ED so quickly, but they were running out of time. "That young doctor explained every single thing they were doing to me. He told me that medicine needed to be administered within three hours or it would not work. He told me they were putting in a 2<sup>nd</sup> IV, and why. Then he stayed right with me through the entire procedure. A while later he asked me how I was feeling and I told him my headache had disappeared and I felt much better." Mr. Myers continued "Dr. Rzeznik pointed out that I could talk again and my speech was clear." In fact Mr. Myers NIHSS had gone from a "7" (lots of deficits) to a "1" (minimal facial droop.)

Mr. Myers was then taken to ICU as a standard precaution to be monitored for 48 hours. He did great and was released on Monday. He came back again Tuesday to visit his wife, and this time came and went as 'just a visitor.'

Mr. Myers explained "normally, I would probably have gone home and taken a nap to see if I felt better. I know that visit to Spalding Regional saved my life. I can't say thank you enough, and thank Ms. Rodman for her knowing more than I did about what was happening to me. And big thanks to everyone who helped me all the way, especially Dr. Rzeznik who was so nice to stay with me and explain everything, it really made me feel okay. I tell everyone now, if you have symptoms that are not usual, don't delay, call 911 and get to Spalding Regional."

As part of Spalding's efforts to increase Stroke Awareness and rapid identification of potential Stroke cases they have been distributing F.A.S.T. cards and magnets all year long at community events. They have the F.A.S.T. posters throughout the facility and numerous locations in the community. In addition to training Stroke Unit staff, non-Stroke Unit staff were provided the F.A.S.T. badge cards as a reference. They have a short Stroke educational requirement based on F.A.S.T. that is either done electronically known as an .eDU or for contracted workers it is offered as a slide presentation.

They were able to see the results of these efforts (supported by the Stroke Awareness pilot project) and how they were able to help effect improved care of the Stroke patient as evident by the story of Mr. Myers. But it didn't stop with this one patient's outcome, he has graciously shared his story with the local newspaper so that others can learn from his experience. He may have been a victim of Stroke, but now he is a "Stroke Champion".

Submitted by Catherine Whitworth, Quality Analyst, Spalding Regional Hospital

#### **WELLSTAR KENNESTONE**

Knowing the signs of a stroke gave Bobby back the ability to speak. Bobby may very well have 9 lives. He was admitted to a healthcare facility near his home about 2 hours northeast of Marietta for elective hip surgery. During the procedure he suffered a cardiac arrest and had to be resuscitated on the table in the OR. Concerned with the function of his heart, Bobby was flown to Kennestone hospital for further evaluation. He was admitted where over a period of several days, he was worked up for the cardiac event he had experienced.

On Monday morning, he was assisted to the bathroom by Simona, a CCP. She provided him with instructions on how to pull the cord if he needed anything and made sure it was within reach. She instructed him to call when he was finished. That morning was also the day that Joint Commission came to visit the hospital so there was no absence of activity on the unit.

While in the bathroom, Bobby felt something was not right and pulled his cord. Simona, recognizing his call light was on, went to his room to provide assistance. She noticed immediately he did not look or act the same as he did when she ushered him into the bathroom minutes ago. She carefully helped him to his bed and notified the nurse. Simona stayed by his side as she could see he was distressed and very scared. Bobby had lost his ability to speak and was weak on one side. The nurse called the rapid response team for further evaluation. The staff in this unit had all been educated to the signs and symptoms of a stroke and what to do if a patient should have these symptoms.

Very quickly Bobby was on his way to radiology for a STAT head CT where he met Neurologist Dr. Reyzelman and Neuro Interventionalist Dr. Rishi Gupta. He was immediately assessed and the treatment options were weighed. Dr. Gupta phoned Bobby's sister for consent after explaining what had just occurred. Consent was obtained and Bobby was taken to the Vascular Institute for a clot retrieval from the Ischemic stroke he was experiencing.

About two hours later, Bobby was recovering from the procedure and found that all of his deficits were gone and he was able to speak and use the right side of his body.

Bobby and his sister Theresa were extremely grateful for the wonderful care they received while on the unit and felt it was their lucky day to have had Simona be assigned to care for Bobby that day. Bobby wishes to thank all the wonderful staff on the unit (6B West) for their care and compassion during his stay. Bobby and his sister returned back to Kennestone to present Simona with the Stroke Awareness Star Award, where he could personally thank her for her quick actions and staying with him when he needed her the most.

Submitted by Susan Zimmermann, Program Manager Neurosciences, Wellstar Kennestone

### **The Perfect Storm**



A message from our PI and QI Director - James Lugtu

On October 28, 1991 a strong cold front known as a nor'easter spawned an extra tropical low off the coast of Nova Scotia. At the same time, a strong high pressure ridge formed that extended from the Appalachian Mountains northeastward to Greenland. As these two strong forces developed another equally strong weather entity came into the picture, Hurricane Grace. The combination of these weather anomalies in the same area created a strong weather system that was later named "The Perfect Storm." Though not the most devastating storm on record its unusual retrograde motion and spawning of record wave heights, some as high as 100 feet helped it live up to its name.

In many Emergency Rooms across the state it always seems a storm is brewing. When strong forces come together it seems chaos is about to break loose. For those who have cared for an Acute Ischemic Stroke patient, a whirlwind of activity breaks out around the patient. EMS enters the ER doors like a nor'easter with their patients at tow. This strong force is met at the ER door by an equally strong hurricane like force of the ER staff, and underlining those forces is the strong ridge created by the stroke team and neurology that guides these two forces along. This combination could be described as the Perfect Stroke Storm. But unlike the Perfect Storm of 1991 the whirlwind activity of this storm can produce positive results. When EMS, ERs, hospital staff and the Stroke Team work together they create a force for good that is unparalleled in its intensity. I would like to relate a recent Perfect Storm that occurred at South Georgia Medical Center as related to me by Lori Trouille NP and Georgianne Bauer RN, stroke coordinator.

"Dr. Mallin, our Neurologist, and I were rounding on patients when we were pre-notified by EMS that a patient was 10 minutes out. On arrival, EMS staff rolled the patient on the scale to obtain an accurate weight and then immediately transported the patient to radiology for a stat head CT. During this time, the ER MD instructed the ER nurse to begin mixing the t-PA as the ER MD discussed exclusion criteria with the patient's wife. Dr. Mallin and I followed patient to CT to review images and to obtain an initial NIH stroke scale. Pertinent patient information was obtained (last seen normal, FSBS, BP, Hx of anticoagulant use, etc) from EMS as radiology techs transferred the patient onto the CT scanner. The patient had dysarthria with left sided weakness that was obvious when EMS initially rolled him into the ER. The ER MD personally brought the t-PA bolus to the CT scanner. Once Dr. Mallin reviewed the images and Ok'd the infusion, the bolus was administered to the patient as he was exiting the CT scanner. ER staff was at the bedside to transfer the patient onto an ER stretcher and to relieve EMS. The effort by all the staff resulted in a 10 minute DTN! This is our fastest time to date. The end result was a phenomenally positive outcome for the patient, who had an NIHSS that went from six to zero within 20 hours of infusion. Three days later, he was discharged home. Without the dedication and perseverance of our staff and the hard work of our EMS, this could have never happened. The sky is the limit..."

As highlighted by Lori and the team at South Georgia Medical Center the cooperation between EMS and hospital staff can create a powerful force for good. In this case, a door to needle time of less than 10 minutes! Results such as these do not have to be a single or rare anomaly. By placing a good process in place these results can be replicated day in and day out. We look forward to the day when "The Perfect Storm" becomes an everyday occurrence in all our ERs across the state. Thank you to Georgianne, Lori, Dr. Dawson and the entire South Georgia Medical Center Stroke Team for allowing me to share your story.

# GA SPA Third Annual Strike Out Stroke A Huge Success



(Pictured Above: Dr. Michael Frankel, Lead Neurologist for the GCASR being interviewed by the Atlanta Braves for the GA SPA Strike Out Stroke Day)

Our 3<sup>rd</sup> annual Strike Out Stroke event was held on Sunday May 4<sup>th</sup>. We had a great turn out this year with almost 500 tickets sold. Debbie Camp and Atlanta Medical Center sold over 120 tickets - they are definitely the team to beat next year! Debbie's granddaughter Marissa also did a great job announcing "Play Ball" to start the game.

Unfortunately the Braves lost 4-1, but we had a great group of people wearing their yellow t-shirts and educating baseball fans on how to act FAST. Dr. Frankel's interview aired on the jumbotron just prior to the game, stressing the importance of knowing the signs and symptoms of stroke. FAST was also displayed on the LED screens around the ballpark during the game, raising awareness for the 30,067 fans in attendance.

We had some wonderful high school students helping us out this year. They were very excited to be there and clearly had passion for the cause. Thanks so much to Rob Anderson and the Fulton County Superintendent's Office for working with us this year. We hope that this is a collaboration that will continue long into the future.

We also had great support from the national Strike Out Stroke organization – Jeanie, Larry and Bill were instrumental in making this event bigger and better than it has ever been. We are truly fortunate to have people like them on our team! A special thank you to Nancy, Jim and Bill. Our GA Genentech team has always been one of GA SPA's biggest supporters and we appreciate you!

THANK YOU again to all the members and supporters of GA-SPA, who came out on a Sunday afternoon to support a very worthy cause – STRIKE OUT STROKE in Georgia. See you next year!

Submitted by Kerrin Connelly, Outreach Manager, Marcus Stroke and Neuroscience Center, Grady Health System

## **Coverdell Highlights**

#### **June Conference Call**

Thank you to Dr. Owen Samuels for presenting on the June Coverdell Hospital and EMS call. Dr. Samuels is Associate Professor of Neurology and Neurosurgery, and Director of Neuroscience Critical Care at Emory. Dr. Samuels presented on "Improving ED recognition of the signs/symptoms of aneurysmal SAH". His presentation included early diagnostic and management strategies in the ED setting.

#### **August Conference Call**

Dr. Michel Frankel, Lead Neurologist for the Georgia Coverdell Acute Stroke Registry, was our guest speaker on the August Coverdell Hospital and EMS call. Dr. Frankel presented on the NIH Georgia Stroke Net project, data on pre notification vs. no notification and tips on how to recognize stroke mimics in the field. We would like to take this opportunity to thank Dr. Frankel for his very informative presentation.

If you have not received any of the presentations and would like one, email Kerrie Krompf at: <a href="mailto:kkrompf@emory.edu">kkrompf@emory.edu</a>.

## **Upcoming Training-Save the Dates**

#### **ASLS Instructor Class**

Our next Coverdell Sponsored ASLS instructor class will be on held on Tuesday, October 7<sup>th</sup> in Fayetteville, GA. More information regarding registration will be sent out shortly. Prerequisites for attending the class - you must have completed an ASLS Provider Course:

- Within the last two years AND
- With score of 85% or higher on the posttest

#### **Abstraction Training Workshop**

Coverdell will be offering an abstraction training workshop on Wednesday, October 8<sup>th</sup> in Fayetteville, GA. The workshop is for all Coverdell Abstractors and/or Stroke Coordinators, both New and Current, who want additional clarification and training on the Stroke Patient Management Tool. More information will follow shortly.