Success With Paramedic Diagnosis of Stroke

To the Editor:

We read with interest the recent article by Frendl et al.,1 the first study to demonstrate a lack of improvement in paramedic stroke diagnosis after training and implementation of a prehospital stroke scale. Having implemented a similar program to Australian paramedics with success (stroke detection improved from 78% to 94%),2 we thought it important to present the reasons we believe our program was successful.

For 1 year, after education sessions on stroke and use of the Melbourne Ambulance Stroke Scale (MASS), we provided paramedics with a monthly bulletin reiterating the need for rapid transport, and presenting data on the proportion of stroke patients with MASS complete and patients treated with thrombolytic therapy at our hospital. In addition to this, we also sent letters to individual paramedics transporting patients receiving thrombolytic therapy informing them of the outcome of the patient. This last action, which we have continued, does not take up much time and assisted with the integration of paramedics into the acute stroke team. Furthermore, programs planning on implementing such programs must first or simultaneously address in-hospital delays. Paramedics repeatedly reported frustrations with programs that implement fast-track transports without addressing diagnostic and treatment delays.

Presently, we are conducting an audit determining whether our initial improvement is sustained 2 years after citywide EMS education and implementation of MASS. The preliminary findings are positive, (92% of confirmed stroke patients with paramedic diagnosis of stroke, n=75) and we look forward to presenting the full results.

Disclosures

None.

Janet E. Bray, RN
Box Hill Hospital
Deakin University
Box Hill, Victoria, Australia

Chris Bladin, MD
Box Hill Hospital
Monash University
Box Hill, Victoria, Australia

Success With Paramedic Diagnosis of Stroke
Janet E. Bray and Chris Bladin

Stroke. 2009;40:e398; originally published online March 26, 2009;
doi: 10.1161/STRKEAHA.108.518423
Stroke is published by the American Heart Association, 7272 Greenville Avenue, Dallas, TX 75231
Copyright © 2009 American Heart Association, Inc. All rights reserved.
Print ISSN: 0039-2499. Online ISSN: 1524-4628

The online version of this article, along with updated information and services, is located on the
World Wide Web at:
http://stroke.ahajournals.org/content/40/5/e398

Permissions: Requests for permissions to reproduce figures, tables, or portions of articles originally published
in Stroke can be obtained via RightsLink, a service of the Copyright Clearance Center, not the Editorial Office.
Once the online version of the published article for which permission is being requested is located, click
Request Permissions in the middle column of the Web page under Services. Further information about this
process is available in the Permissions and Rights Question and Answer document.

Reprints: Information about reprints can be found online at:
http://www.lww.com/reprints

Subscriptions: Information about subscribing to Stroke is online at:
http://stroke.ahajournals.org/subscriptions/