

UWMC ED - Stroke Code Response Team Roles



| Department | Stroke Code Response Team | • General Role |
|-----------------|--|---|
| ED | ED Attending: 598-0105 | <ul style="list-style-type: none"> Initiate patient workup (<i>assessment, CT, Labs, ECG</i>). Activate STROKE CODE (dial '222'). Submit Radiology requisition as "<i>CT/CTA Head – Acute Stroke</i>". Call Lead CT Tech (8-2047): <ol style="list-style-type: none"> 1) to clear scanner 2) to get Radiologist to meet patient in scanner Communicate plan & findings with ED Charge RN, Stroke Attending & Neurology Resident. After CT resulted, call Transfer Center (744-0962) and clearly communicate whether: <ul style="list-style-type: none"> o STAT Transfer (<i>Critical Care Transport</i>), or o Urgent Transfer (<i>no CCT</i>) is needed. o If <i>ETA ≥ 20 minutes for STAT Transfer, ask Transfer Center to call 911</i> |
| | ED Charge RN: 598-2240 Primary ED RN | <ul style="list-style-type: none"> Activate STROKE CODE if delegated by ED attending; Follow patient status/ RN pt assignment. Ensure primary ED RN has appropriate resources & is aware of stroke code. Package patient for immediate transport to CT. Facilitate orders & pt's needs. Send blood work to lab & blood bank. Perform I-STAT Chem 8 (<i>for serum Cr</i>). Keep patient NPO (<i>for swallow screen</i>). |
| | ED UHC/MA: 598-7990 | <ul style="list-style-type: none"> Submit CT request as CT Head, enter only one study: "<i>HEAD CT/CTA WO/W</i>" <i>Indication is: "Acute Stroke Protocol"</i> Communicate with Lead CT Tech regarding imminent patient transport to CT scanner. Send blood work to lab & blood bank. Confirm 12-Lead EKG performed. |
| Neurology | Stroke Attending: 744-6789 | <ul style="list-style-type: none"> To be available by phone for stroke consultation. Confirm Dx and treatment plan with Neuro Resident. Alert HMC Neuro IR/Anesthesia as necessary for transfers. Activate HMC Code Stroke as necessary for transfers. |
| | Neurology Resident On-Call: 598-6190 (<i>page operator</i>) | <ul style="list-style-type: none"> Report to ED, review with ED Attending and Stroke Attending. Initiate/ complete Stroke workup. Communicate plan/ updates with primary ED RN & ED Charge RN. Communicate patient transfer details to HMC Neurology Resident on-Call & HMC Stroke Fellow Complete <u>Stroke QI Flow Sheet</u> & place with medical record. |
| | Stroke ARNP/Manager: Pg 540-1246 Main STROKE CODE Pg: 540-5514 | <ul style="list-style-type: none"> Facilitate project coordination, address process issues. Follow up on Stroke QI Flow Sheets with QI Lead. Maintain STROKE CODE pager. Admin Office 744-3975 |
| Radiology: CT | Lead CT Tech: 598-2047 | <ul style="list-style-type: none"> Clear scanner for stroke patient. Alert Neuroradiology Attending (<i>days</i>) & Radiology On-Call Resident (<i>nights</i>) of patient. Follow standard protocol to emergent scans. Keep communication open with ED & Neurology Team. |
| | Neuroradiology Attending (<i>days</i>): 598-0101 Radiology Resident On-Call (<i>nights</i>): 598-2068 | <ul style="list-style-type: none"> Meet patient/care team in CT scanner for live on-the-table wet-read. Protocol CTA (while patient still in scanner): <ul style="list-style-type: none"> o For hemorrhagic CVA, CTA head (<i>skull base thru Circle of Willis</i>). o For ischemic CVA, CTA Neck (<i>Aortic Arch thru Circle of Willis</i>) <u>with perfusion imaging</u>. Contact ED Attending ASAP with CT/CTA read. |
| Transfer Center | 744-0962 | <ul style="list-style-type: none"> Determine with ED Attending whether STAT (<i>Critical Care Transport</i>) or Urgent (<i>no CCT</i>) needed Contact AMR, clearly communicating STAT vs. Urgent transfer needs. Obtain ETA from AMR. If <i>ETA ≥ 20 minutes for STAT transfer, consider calling 911 to arrange expedited transport (based on a case-by-case discussion)</i>. Communicate ETA with ED Attending. |
| Pharmacy | Pharmacy Lead: Pg 405-6182 * To order tPA CALL 598-5058 | <ul style="list-style-type: none"> "Heads-up," Standby. ED/Neurology will notify pharmacy & order tPA if needed. |
| QI | Stroke QI: 540-3079 ED QI: 540-7483 | <ul style="list-style-type: none"> Review Stroke QI Flow Sheets & Cases; Data analysis |