

COUNTY OF VENTURA HEALTH CARE AGENCY		EMERGENCY MEDICAL SERVICES POLICIES AND PROCEDURES	
Policy Title: Thrombectomy Capable Acute Stroke Center (TCASC) Standards		Policy Number 452	
APPROVED: Administration: Steven L. Carroll, Paramedic		Date: June 1, 2018	
APPROVED: Medical Director: Daniel Shepherd, MD		Date: June 1, 2018	
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Review Date: January 31, 2021			

- I. **PURPOSE:** To define the criteria for designation as a Thrombectomy Capable Acute Stroke Center (TCASC) in Ventura County.
  - II. **AUTHORITY:** California Health and Safety Code, Sections 1797.114, 1797.220, 1798, 1798.2, 1798.101, and California Code of Regulations, Title 22, Section 100147 and 100169.
  - III. **DEFINITIONS:**

**Acute Stroke Center (ASC):** Hospital designated as an Acute Stroke Center, as defined in VCEMS Policy 450.

**ELVO Alert:** A pre-arrival notification by pre-hospital personnel to the base hospital that a patient is suffering a possible Emergent Large Vessel Occlusion (ELVO) ischemic stroke.

**Thrombectomy Capable Acute Stroke Center: (TCASC)** Acute Stroke Center (ASC) that has the capability to perform neuroendovascular procedures for acute stroke including thrombectomy and intra-arterial thrombolysis.
  - IV. **POLICY:**
    - A. A Thrombectomy Capable Acute Stroke Center (TCASC), approved and designated by Ventura County EMS (VC EMS), shall meet the following requirements:
      1. All the requirements of an Acute Stroke Center (ASC) as defined in Policy 450.
      2. Certified as a Primary Stroke Center or a Comprehensive Stroke Center by either The Joint Commission, Det Norske Veritas, or the Healthcare Facilities Accreditation Program.
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3. Neurointerventionist on call 24/7 and available on-site at TCASC within 45 minutes of notification of an ELVO alert.
  4. Neurosurgeon on call 24/7 and available to provide care as indicated.
  5. Neurologist, with hospital privileges to provide ICU level of care for acute stroke patients, on call 24/7 and available to provide care as indicated.
  6. An individual Neurointerventionist or Neurosurgeon may not be simultaneously on call for a separate hospital.
  7. Appropriate endovascular catheterization laboratory personnel available on-site within 45 minutes of notification of an ELVO alert
  8. Will create policies and procedures detailing how the TCASC will notify the appropriate personnel of an ELVO alert.
  9. Will accept all ELVO alert patients, regardless of ICU or ED saturation status, except in the event of internal disaster or no catheterization laboratory availability.
  10. Will create policies and procedures detailing how the TCASC will manage the presentation of concurrent ELVO alerts.
  11. Will create policies and procedures that allow the automatic acceptance of any ELVO patient from a Ventura County Hospital upon notification by the transferring physician.
  12. Ability to perform endovascular procedures as indicated for emergent large vessel occlusions.
  13. Have CT or MRI perfusion capabilities.
  14. Maintain appropriate staff and facility availability to address complications of emergent endovascular procedures.
  15. Will complete VCEMS ELVO Data spreadsheet on a monthly basis. Data for the preceding month will be due on the 15<sup>th</sup> of the following month.
- B. Designation Process:
1. Application:
    - a. When all requirements are met, submit a written request for a **Preliminary** TCASC designation to VC EMS no later than 30 days prior to the desired date of designation, documenting the compliance of the hospital with Ventura County TCASC Standards.
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2. Approval:
    - a. Upon receiving a written request for **Preliminary** TCASC designation, VC EMS will arrange an on-site survey of the requesting hospital to assure compliance with stated requirements. A Comprehensive Stroke Center (CSC) or Thrombectomy-Capable Stroke Center (TSC) certified by either The Joint Commission, Det Norske Veritas, or the Healthcare Facilities Accreditation Program will not require an on-site visit if the EMS agency was present at the initial survey.
    - b. TCASC approval or denial shall be made in writing by VC EMS to the requesting hospital within two weeks after receipt of the request for approval and all required documentation and completion of the VC EMS site survey.
  3. VCEMS may deny, suspend, or revoke the designation of a TCASC for failure to comply with any applicable policies, procedures, or regulations. Requests for review or appeal of such decisions shall be brought to the Ventura County Board of Supervisors for appropriate action.
  4. The VC EMS Medical Director may grant an exception to a portion of this policy upon substantiation of need by the TCASC that compliance with the regulation would not be in the best interests of the persons served within the affected area.
  5. A **Formal** TCASC Designation will be granted after demonstration of competency through data submission and review.
  6. TCASCs shall be reviewed on a biannual basis in conjunction with the ASC review process.
    - a. TCASCs shall receive notification of evaluation from the VCEMS.
    - b. TCASCs shall respond in writing regarding program compliance.
    - c. On-site TCASC visits for evaluative purposes may occur.
    - d. TCASCs shall notify VCEMS by telephone, followed by a letter or email within 48 hours, of changes in program compliance or performance.
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