

Date: January 11, 2023

System Memo: # 412

To: All System members; Region IX partners
From: Matthew T. Jordan, MD, FACEP
EMS System Medical Director

RE: **NCH (temporarily) transitioning to Primary Stroke Center**

Effective immediately: Northwest Community Hospital's Stroke Center status has changed from Comprehensive to Primary. They have recently been redesignated as a **Thrombectomy-capable Stroke Center** by the Joint Commission under their standards and guidelines.

IDPH has been notified of the change. Under Illinois law and rules, IDPH cannot recognize the Thrombectomy capable designation, so the State database currently lists NCH as a Primary SC.

NCH has submitted a new Comprehensive Stroke Center application to DNV (see below) that has been accepted and a site visit has been scheduled for February.

NCH continues their strong commitment to excellent stroke care and looks forward to regaining Comprehensive status very soon. We will notify our stakeholders as any changes in status occur.

We have amended the online NWC EMS SOPs to reflect this change in status – please inform all EMS/ECRN personnel so transport patterns for patients with stroke align with Region IX protocols.

Background information

Options for Stroke Center certification agencies

There is currently no unified stroke center certification system in the United States. In addition to the Joint Commission, there are two other national certification agencies that certify stroke centers and follow similar guidelines consistent with recommendations of the AHA/ASA and the Brain Attack Coalition (BAC) in their stroke center certification processes: Det Norske Veritas and Germanischer Lloyd (**DNV**), an international organization, and the Healthcare Facilities Accreditation Program (HFAP). Both organizations have been formally approved by the Centers for Medicare and Medicaid Services (CMS) to certify stroke centers nationally. In addition to these national agencies, individual states also certify stroke centers.

There are four (4) tiers of stroke center recognized nationally (but not by each state)

Comprehensive Stroke Center or CSC – A hospital that has been certified and has been designated as a Comprehensive Stroke Center under Subpart K. (Section 3.116 of the Act). These hospitals have the highest capabilities and most resources for treating patients with acute stroke with advanced neuroimaging, endovascular neurointervention, a specific volume of patients with stroke, a database for tracking complications and patient outcomes, and participation in patient-centered research.

Thrombectomy-capable stroke centers can perform thrombectomies on patients with stroke, but they do not need to meet all of the requirements of Comprehensive Stroke Centers. They must have performed a specific number of mechanical thrombectomies during the past 2 years, but are not required to participate in patient-centered research. (Not recognized in Illinois)

Primary Stroke Center or PSC – A hospital that has been certified by a Department-approved, nationally recognized certifying body and designated as a Primary Stroke Center by the Department. (Section 3.116 of the Act). These hospitals can quickly evaluate a patient with stroke, provide IV thrombolytics, and provide advanced medical management of stroke based on evidence-based guidelines for stroke care.

Acute Stroke Ready Hospital or ASRH – A hospital that has been designated by the Department as meeting the criteria for providing emergent stroke care. Designation may be provided after a hospital has been certified or through application and designation as an Acute Stroke-Ready Hospital. (Section 3.116 of the Act). These facilities can identify and initiate care to patients with stroke but ultimately often transfer them to another facility with more advanced care.