



Minnesota Stroke Registry Conference 2008
Improving Stroke Care For All Minnesotans

October 14, 2008

Breakout Sessions

1. Drip and Ship: Panel Discussion

Both "sending" and "receiving" hospitals will be represented in a panel discussion about the processes, barrier, challenges, and issues related to transferring patients from one hospital to another. A short presentation from a sending hospital will be followed by remarks from a receiving hospital and a facilitated group discussion. These two Get With The Guidelines™ hospitals will provide valuable insights. Additionally, information about the new V-code for reimbursement will be shared and discussed.

2. Performance Measure Discussion: Stroke Patient Education

This will be a discussion of one of the most confusing performance measures, Stroke Patient Education. What tools are sufficient? What counts as education? What documentation is appropriate? What if the patient is discharged to an in-hospital rehabilitation ward? These and other questions will be addressed. Presented by a hospital participating in Get With The Guidelines-Stroke.™

3. Data Abstraction Training

This breakout session will be a training workshop for data abstractors who are new to the registry. Attendees will receive an overview of all of the required data elements, with a focus on the items that we have found to be most challenging. This session is required for any data abstraction staff (either from "new" or "old" hospitals) who have not yet undergone training.

4. Developing a Stroke Program

For hospitals wishing to develop or enhance a stroke program, this session will provide insights into the key components, challenges to expect, and tools to establish and maintain a successful stroke program. Presented by a hospital participating in Get With The Guidelines-Stroke.™ Staff from a stroke program will speak, answer questions, and lead the discussion.

5. Discussion: Improving Quality of Stroke Care – The Acute Care Bundle

This session will focus on measures which pertain to the immediate care of the stroke patient in the emergency room. We will, in particular, focus on thrombolytic therapy and the opportunities to increase the fraction of eligible patients who receive this therapy. Panel members are invited to discuss other actions taken by providers in the emergency department - for example, allowing PO intake before dysphagia screening, which may impact compliance to performance measures downstream.