

Prehospital Stroke Treatment faster is better



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MEDICAL DIVISION

How can we make things better?

- Quality Indicators.
- “Fast lane” for patients with suspected CVA diagnosis.
- Dispatcher tools (video chat, timer, dispatcher guidance cards).
- Medics/paramedics tools (computerized FAST –ED via MDA app)
- Transportation of suspected LVOS to hospitals with cerebral catheterization capabilities.
- Research — evaluation of the added value of amb’ transport of stroke VS. Self referral.
- Coming soon – MSU (mobile stroke unit with CT)



Quality Indicators for stroke

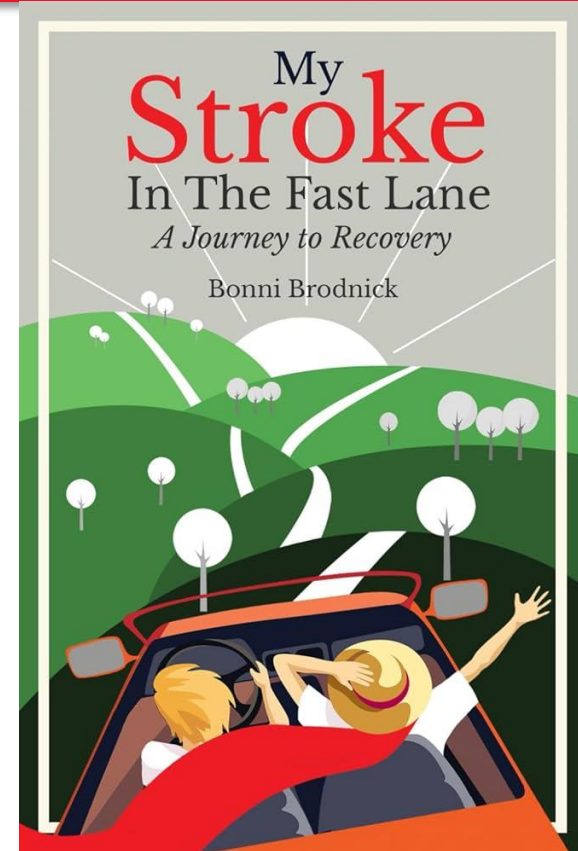
- F.A.S.T + B.P + DEX + LKN (Last Known Normal)
- Early Hospital report.
- Quality indicators compliance – 97%-100%

מדדי איכות - CVA

חשש לשבץ מוחי - CVA <input type="checkbox"/> לא <input checked="" type="checkbox"/> כן	
דיווח לבית חולים על ידי מוקד/צוות <input type="checkbox"/> לא <input checked="" type="checkbox"/> כן	דיווח ל: <input type="text"/> שעה: <input type="text"/>
מידות רפואיות על פי הנתונים שהוזנו בטופס הרפואי	
לחץ דם: לא נמדד/דופק: לא נמדד/סוכר: לא נמדד	ניר-פנים: לא נבדק/ניר-כח גס: לא נבדק/ניר-דיבור: לא נבדק/מנ הופעת סימני שבץ: לא נבדק
אישור נתוני מדידות <input type="checkbox"/>	

Fast lane for suspected stroke

- Joint venture with many hospitals
- Following the early report a neurologist “receive” the patient in the ER and the patient is transferred directly (on the ambulance cote) to the CT.
- If the CT is unavailable / the cat lab is unavailable the patient will receive early TPA.



Transportation of suspected LVOS to hospitals with cerebral catheterization capabilities

- Active since 2019.
- The Aim – transporting patients with high probability of LVOS directly to hospitals with cerebral catheterization capabilities.
- Selection criteria –
 1. clinical criteria
 2. patient /family agreement
 3. Prehospital time added (added transport time) < 30min'
 4. NO known contraindications for cerebral catheterization.



> Eur J Emerg Med. 2025 Feb 1;32(1):64-65. doi: 10.1097/MEJ.0000000000001185. Epub 2024 Dec 23.

The impact of prehospital transport method on time to first computed tomography scan in patients with acute stroke: a retrospective district-wide analysis

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Affiliations + expand

PMID: 39727403 DOI: [10.1097/MEJ.0000000000001185](https://doi.org/10.1097/MEJ.0000000000001185)

- The added value of MDA early assessment and transportation VS. Self referral to the E.D.
- Stroke patients records from “Soroka” medical center (1255 patients)
- Door to CT time – 42min’ for EMS group VS. 99min’ for Self referral group.

Coming soon – MSU (mobile Stroke unit)

- A joint venture with “Belinson” hospital and Israeli MOH.
- Another mean to shorten “time to needle” period (time to cerebral cath ‘/TPA).
- A pilot in a large metropolitan area.



