



Westchester Regional EMS Council

REMAC ADVISORY NYS STROKE CENTER DESIGNATIONS

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In February 2005, the New York State Department of Health Bureau of EMS (NYSDOH BEMS) distributed to every EMS agency in NYS a revised **NYS Suspected Stroke Protocol** that had been approved by the New York State Emergency Medical Advisory Committee (SEMAC) and the New York State Emergency Medical Services Council (SEMSCO)ⁱ. Executive EMS Officers were advised to replace the existing **NYSDOH BLS Protocol M – 17ⁱⁱ** in the NYS Basic Life Support (BLS) Protocols for Emergency Medical Technicians (EMT) and Advanced Emergency Medical Technicians.

While treatment of the suspected stroke patient remains the same, the revised NYSDOH BLS stroke protocol contains critical changes affecting transport decisions:

- Suspected stroke patients should be closely assessed to determine if possible the time of onset of stroke symptoms.
- Suspected stroke patients are to be diverted past a closer community hospital to a NYSDOH designated Stroke Center **only if the patient can arrive at the stroke center within 2 Hours of the onset of stroke symptoms.**

NOTE: EMS personnel must contact the NYSDOH designated Stroke Center as soon as possible to advise them of the transport of a suspected stroke patient to their hospital. This will allow the Stroke Center time to assemble a Stroke Team.

- Suspected stroke patients **MUST** be transported to **closest appropriate hospital emergency department (ED)** if any of the following apply
 1. Patient is in cardiac arrest
 2. Patient has an unmanageable airway
 3. Patient has (an) other medical condition(s) that warrant(s) transport to the closest appropriate hospital emergency department (ED) as per NYS and/ or Regional protocol
 4. Total prehospital time (time from when the patient's symptoms and/or signs first began to when the patient is expected to arrive at the Stroke Center) is greater than 2 hours

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5. On-line Medical Control so directs.

Although it was originally announced that only a number of hospitals in New York City (Kings and Queens Counties) had been designated Stroke Centers as part of the pilot study, the NYSDOH has subsequently approved additional facilities as Stroke Centers. There are now designated Stroke Centers in our Region, as well as some located in areas immediately adjacent to our Region.

As of this REMAC Advisory statement, the following Regional hospital(s) have received final designation as a NYS Stroke Center:

Hospital	City	Region (County)	As of REMAC Advisory Date
Hudson Valley Hospital Ctr	Cortlandt Manor	Westchester (Westchester)	11/30/2005
Lawrence Hospital	Bronxville	Westchester (Westchester)	01/03/2007
Mt. Vernon Hospital	Mt. Vernon	Westchester (Westchester)	01/27/2006
No. Westchester Hospital Ctr	Mt Kisco	Westchester (Westchester)	01/24/2006
Sound Shore Medical Ctr	New Rochelle	Westchester (Westchester)	02/03/2006
St. John's Riverside Hospital	Yonkers	Westchester (Westchester)	01/03/2007
Westchester Medical Ctr	Valhalla	Westchester (Westchester)	01/27/2006
White Plains Hospital Ctr	White Plains	Westchester (Westchester)	09/02/2005

The following hospital(s) in neighboring EMS Regions have also received final designation as a NYS Stroke Center:

Hospital	City	Region (County)	As of REMAC Advisory Date
Bronx Lebanon Hospital Ctr - Concourse Division	NYC (Bronx)	New York City (Bronx)	01/03/2007
Good Samaritan Hospital	Suffern	Hudson Valley (Rockland)	09/02/2005
Jacobi Medical Ctr	NYC (Bronx)	New York City (Bronx)	01/24/2006



Hospital	City	Region (County)	As of REMAC Advisory Date
Lincoln Medical & Mental Health Center	NYC (Bronx)	New York City (Bronx)	01/03/2007
Montifiore Medical Ctr – Moses Division	NYC (Bronx)	New York City (Bronx)	01/24/2006
NY - Westchester Square Medical Ctr	NYC (Bronx)	New York City (Bronx)	09/02/2005
Nyack Hospital	Nyack	Hudson Valley (Rockland)	09/02/2005
Our Lady of Mercy Hospital Ctr	NYC (Bronx)	New York City (Bronx)	01/03/2007
St. Barnabas Hospital	NYC (Bronx)	New York City (Bronx)	09/02/2005

As with the preexisting NYSDOH Trauma Protocols and Regional / Area Trauma Center system, all Regional agencies should ensure that their members are aware of the NYSDOH BLS Suspected Stroke protocols and determine how these designations will now affect their individual EMS operations.

The NYSDOH continues to accept and process applications from facilities across the state. It is expected that more regional / area hospitals will be approved as a designated Stroke Centers in the next year making the impact to individual agency operations negligible. When the REMAC has been advised of further designations, an updated advisory will be issued to all regional EMS agencies.

Hospitals who have received designation as stroke centers are required to notify local EMS agencies and systems when they are approved and offer training specific to the recognition and treatment of stroke. If there are any questions on a hospital's approval to begin operation, please contact the Regional EMS Office at 914-231-1616.

Please refer all questions regarding this advisory to the Regional EMS Office Staff. Your anticipated cooperation is appreciated.

Issued by:

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Chair, Westchester Regional Emergency Medical Advisory Committee
Regional Medical Director, Westchester Regional EMS Council

Attachments:

ⁱ Letter from NYSDOH BEMS Director Wronski (February 2005)

ⁱⁱ Updated NYSDOH BLS Protocol M-17 – Suspected Stroke (January 2005)