"Stroke Protocol for Joint Commission Certified Stroke Centers"

Title: Stroke Protocol **Effective Date:** June 2009

Purpose: To establish a process for Interpreting and Communicating Stroke Alert

Results

Policy: ORMG strictly adheres to the existing Stroke Protocol Processes in place for Client Facilities.

Procedure

- 1. Exams designated as Stroke Alerts will be identified by Client Facility and communicated to ORMG via Facsimile or telephone by authorized personnel.
- 2. ORMG will prioritize exam by alerting all available Radiologists with appropriate hospital credentials and privileges.
- 3. Stroke Alert exam will be interpreted by ORMG within 10-15 minutes of receipt of images and patient history.
- 4. ORMG Radiologist will interpret exam and designate results as a Critical Result, whether findings are Positive or Negative for Stroke.
- 5. Once the Stroke Alert has been reported to the responsible licensed caregiver, ORMG will document the communication and a secondary patient report will be faxed to CLIENT indicating the following:
 - a. Time Results were called to CLIENT facility.
 - b. Name of responsible licensed care giver (i.e. nurse, physician)
 - c. Name of ORMG physician or designee who called critical finding

Developed by: ORMG Administration **Policy Primary:** VP of Operations