

NETRAC Regional Stroke Transport Plan



Stroke Transport Plan

2024

Next Review: 2026

NETRAC Regional Stroke Transport Plan

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NETRAC Regional Stroke Transport Plan

I. Introduction

a. Organization

Northeast Texas Regional Advisory Council (NETRAC) is a 501 (c)(3) organization located within Trauma Service Area or TSA-F in Texas. NETRAC proudly serves Northeast Texas including the counties of Bowie, Cass, Delta, Franklin, Hopkins, Lamar, Morris, Red River, and Titus.

b. Mission

To Promote, Develop, and Advance an Acute Care, Emergency Healthcare, and Disaster Preparedness System.

c. Regional Transport Plan

This Stroke Transport Plan has been developed in accordance with generally accepted Stroke guidelines and procedures for implementation of a comprehensive Emergency Medical Services (EMS) and Stroke System plan. This plan does not establish a legal standard of care, but rather is intended as an aid to decision-making in general patient care scenarios. It is not intended to supersede the physician's prerogative to order treatment.

II. Regional Stroke System of Care Goals

The purpose of the NETRAC Stroke Transport Plan is to facilitate the collaboration and advancement of a regional stroke system of care based on accepted, evidence-based standards to decrease morbidity and mortality related to stroke. Regional goal is for patients to be identified, rapidly and accurately assessed, and based on the identification of their actual or suspected onset of symptoms should be transported to the nearest appropriate designated stroke facility.

III. Facility Certification and Designation

NETRAC supports TSA-F facilities that wish to seek designation as a stroke facility. A facility seeking state designation as a Stroke Facility (II, III, or IV) must apply to the Texas Department of State Health Services (DSHS).

- Letter of regional participation will be provided to entities that meet the minimum standard of participation according to the NETRAC Bylaws for those seeking certification and/or designation
- Designated stroke facilities within TSA-F should adhere to the Texas Administrative Code Rule 157.133
- Facilities within TSA-F should meet the current requirements set forth by their Certification agency
- In addition, TSA-F recognizes Clinical Practice Guidelines from the AHA for those facilities seeking certification and/or Designation. Recommended guidelines include but are not limited to:
 - AHA/ASA Guideline – Guidelines for the Early Management of Patients with Acute Ischemic Stroke: 2019 update

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- AHA/ASA Guideline – 2022 Guideline for the Management of Patients with Spontaneous Intracerebral Hemorrhage

IV. System Triage

- To ensure prompt availability of medical resources needed for optimal patient care by transporting patients to the closest and/or most appropriate facility based on last known well and identified neuro deficits. Each patient will be assessed for instability which includes deteriorating vital signs and/or altered mental status and concurrent disease/predisposing factors. Unstable patients should be taken to the nearest Emergency Department for stabilization and then transferred to an appropriate stroke facility.
- Unless immediate stabilization is required, patients with an onset of stroke symptoms > 4.5 hours and less than 24 hours should be taken to the nearest designated Stroke Facility.
- Patients with an onset of stroke symptoms less than 4.5 hours, wake-up strokes who are within 4.5 hours of being discovered, or patients with an unknown time of onset, should be taken to the closest designated Stroke Facility. Patients with an onset of stroke symptoms greater than 4.5 hours and less than 24 hours with symptoms of large vessel occlusion, should be transported to a Comprehensive Stroke Facility bypassing Primary Stroke Facilities if transport time is less than 30 minutes.
- Patients with an onset greater than 24 hours should be taken to the closest designated Stroke Facility.

V. Facility Bypass

Suspected stroke patients should be safely and rapidly transported to the closest certified or designated stroke facility except under the following circumstances:

- If unable to establish and/or maintain an adequate airway, the patient should be taken to the nearest acute care facility for stabilization.
- When a facility is unable to meet hospital resource criteria or when there are patients in need of higher level of care.
- If the expected transport time to the nearest appropriate Stroke Facility is excessive, >30 minutes, medical control or the EMS crew on scene should consider activating air transportation resources.
- Patient preference

VI. Facility Diversion

TSA-F stroke facilities should communicate “facility diversion” status promptly and clearly to applicable EMS agencies and Stroke Facilities. Communication will ensure stroke patients are transported to the closest designated stroke facility.

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VII. Inter-Hospital Transport Plan

a. Identification of Stroke Patients & Stroke Transfers

Stroke patients requiring additional or specialized care and treatment beyond a facility's capability are transferred to the most appropriate facility as soon as possible.

b. Stroke Patient Transport

Stroke patients in TSA-F are transported according to patient needs, availability of air transport resources, and environmental conditions. Ground transport and air transport via BLS, ALS, or MICU is available throughout TSA-F and surrounding regions.

c. Stroke Patient Rehabilitation

Rehabilitation and continuing care of the stroke patient will be a coordinated effort involving but not limited to the stroke patient, the patient's family, physicians, and the stroke facility. The goal of this region is to provide the best possible care for a stroke survivor.

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VIII. TSA-F Stroke Facilities

Designated Stroke Facilities

Primary (Level III)

CHRISTUS St. Michael Health System
Texarkana, Texas

Paris Regional Health
Paris, Texas

Titus Regional Medical Center
Mt. Pleasant, Texas

Support (Level IV)

CHRISTUS St. Michael Hospital
Atlanta, Texas

Certified Stroke Facility

TJC – Primary Stroke Center

CHRISTUS Mother Frances Sulphur Springs
Sulphur Spring, Texas

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IX. AHA EMS Stroke Routing

