

## The Joint Commission Advanced Stroke Certification - Program Concept Comparison

Program Concept	ASRH	PSC	TSC	CSC
Eligibility	General eligibility requirements: use of a standardized method of delivering care centered on national evidence-based guidelines for stroke care.	General eligibility requirements: use of a standardized method of delivering care centered on national evidence-based guidelines for stroke care.	<p>*General eligibility requirements: use of a standardized method of delivering care centered on national evidence-based guidelines for stroke care.</p> <p>*Organization must have performed mechanical thrombectomy and post-procedure care for at least 15 patients with ischemic stroke over the past 12 months (or 30 over past 24 months).</p> <p>*Physicians who perform mechanical thrombectomy at the organization applying for certification must perform 15 mechanical thrombectomies over the past 12 months (or 30 over past 24 months) (procedures performed at hospitals other than the one applying for TSC certification can be included in the individual physician total)</p>	<p>*General eligibility requirements: use of a standardized method of delivering care centered on evidence-based guidelines for stroke care.</p> <p>*Treatment of 10 aneurysmal subarachnoid hemorrhages annually (20 over 2 years)</p> <p>*Treatment of 15 intracranial aneurysms using an FDA approved device annually (30 over 2 years)</p> <p>*Administering IV thrombolytic therapy 25 times annually (50 times over 2 years)</p> <p>*Organization must have performed mechanical thrombectomy and post-procedure care for at least 15 patients with ischemic stroke over the past 12 months (or 30 over past 24 months).</p> <p>*Physicians who perform mechanical thrombectomy at the organization applying for certification must perform 15 mechanical thrombectomies over the past 12 months (or 30 over past 24 months) - procedures performed at hospitals other than the one applying for TSC certification can be included in the individual physician total</p>
Program Medical Director	Sufficient knowledge of cerebrovascular disease to provide clinical guidance and administrative leadership to the program	Has extensive knowledge of cerebrovascular disease to provide clinical guidance and administrative leadership to the program	Has extensive knowledge and experience in the care of patients with stroke to provide clinical guidance and administrative leadership to the program	Has extensive knowledge and expertise in neurology and cerebrovascular disease; available 24/7
Acute Stroke Team	Available 24/7	Available 24/7	Available 24/7	Available 24/7
Emergency Medical Services Collaboration	The program has a relationship with EMS including prehospital notification, access to treatment protocols, routing plans	The program has a relationship with EMS including prehospital notification, access to treatment protocols, routing plans, EMS records of care	The program has a relationship with EMS including prehospital notification, access to treatment protocols, routing plans, EMS records of care	The program has a relationship with EMS including prehospital notification, access to treatment protocols, routing plans, EMS records of care
Stroke Unit	No designated beds required for care of stroke patients	Required stroke unit or designated beds for the care of stroke patients	Required stroke unit or designated beds for the care of stroke patients Required neurointensive care unit or designated intensive care beds for complex stroke patients available 24/7 Required on-site critical care coverage 24/7	Required stroke unit or designated beds for the care of stroke patients Required neurointensive care unit or designated intensive care beds for complex stroke patients available 24/7 Required on-site neurointensivist coverage 24/7
Diagnostic Testing Capability	Required 24/7: CT, (MRI if used in acute diagnosis of stroke), diagnostic laboratory testing	Required 24/7: CT/CTA, (MRI if used in acute diagnosis of stroke), diagnostic laboratory testing	Required 24/7: Catheter angiography, CT/CTA, MRI/MRI including diffusion weighted imaging (DWI), diagnostic laboratory testing	Required 24/7: Catheter angiography, CT/CTA of the head, MRI/MRA including diffusion weighted imaging (DWI), diagnostic laboratory testing

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		At least one modality for cardiac imaging, is available to all patients admitted for a stroke	Required when indicated by patient need: Carotid duplex ultrasound, TEE	Required when indicated by patient need: Carotid duplex, TEE, TTE, TCD
Neurologist Accessibility	24/7 via in person or via telemedicine	24/7 via in person or telemedicine	24/7 via in person or telemedicine; written call schedule for attending physicians providing availability 24/7	Demonstrates ability to meet concurrent emergent needs of multiple complex stroke patients; Written call schedule for attending physicians providing availability 24/7
Neurosurgical Services	There is a written protocol for transfer that includes communication and feedback from the receiving facility	OR is available 24/7 in PSCs providing neurosurgical services with necessary staff and equipment	OR is available 24/7 in TSCs providing neurosurgical services with necessary staff and equipment	24/7 availability
Neurointerventional Services	There is a written protocol for transfer that includes communication and feedback from the receiving facility	There is a written protocol for transfer that includes communication and feedback from the receiving facility	24/7 availability: Neurointerventional coverage is documented in a written plan and call schedule is readily available, a physician privileged to perform MT is available onsite within 30 minutes  The following licensed practitioners and staff are available: neurointerventionalist(s), diagnostic radiologist with experience in diagnosing acute stroke, endovascular catheterization lab technician(s), endovascular registered nurses	24/7 availability: Neurointerventional coverage is documented in a written plan and call schedule is readily available, a physician privileged to perform MT is available onsite within 30 minutes  The following licensed practitioners and staff are available: neurointerventionalist(s), diagnostic radiologist with experience in diagnosing acute stroke, endovascular catheterization lab technician(s), endovascular registered nurses
Telemedicine	Within 20 minutes of it being necessary	Available if necessary	Available if necessary	Available if necessary
Treatment Capabilities	IV thrombolytics (Anticipate transfer of patients who have received IV thrombolytics)	IV thrombolytics and medical management of stroke	IV thrombolytics; endovascular therapy, medical management of stroke	Complex ischemic and hemorrhagic stroke patients including but not limited to, IV thrombolytics; endovascular therapy; treatment of aneurysms using an FDA approved device; carotid artery procedures, neurosurgical services as indicated by patient need
Staff Stroke Education Requirements	The core stroke team determines training and education content All physicians and staff who provide stroke care demonstrate knowledge of program's protocols Program provides initial orientation and ongoing education and training to those who care for stroke patients All staff in the organization receive education on stroke symptom recognition and	The core stroke team determines training and education content All physicians and staff who provide stroke care demonstrate knowledge of program's protocols Program provides initial orientation and ongoing education and training to those who care for stroke patients All staff in the organization receive education on stroke symptom recognition and activation of the stroke alert process	The core stroke team determines training and education content All physicians and staff who provide stroke care demonstrate knowledge of program's protocols Program provides initial orientation and ongoing education and training to those who care for stroke patients All staff in the organization receive education on stroke symptom recognition and activation of the stroke alert process	The core stroke team determines training and education content All physicians and staff who provide stroke care demonstrate knowledge of program's protocols Program provides initial orientation and ongoing education and training to those who care for stroke patients All staff in the organization receive education on stroke symptom recognition and activation of the stroke alert process

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	activation of the stroke alert process			
Provision of Educational Opportunities	Provides educational opportunities to prehospital personnel	Provides educational opportunities to prehospital personnel; Provides at least 2 stroke education activities per year to public	Provides educational opportunities to prehospital personnel; Provides at least 2 stroke education activities per year to public	Provides educational opportunities to prehospital personnel; Provides at least 2 stroke education activities per year to public; Licensed practitioners present 2 or more educational courses annually for internal staff or individuals external to the comprehensive stroke center (e.g., referring hospitals)
Clinical Performance Measures	Standardized Measures: 3 inpatient (ASR-IP) and 2 outpatient (ASR-OP) acute stroke ready measures for a total of 5 measures.	Standardized Measures: 8 inpatient stroke (STK), 1 outpatient (STK-OP) measure, and 1 ischemic comprehensive stroke (CSTK-01) measure for a total of 10 measures.	Standardized Measures: 8 inpatient STK measures and 5 ischemic comprehensive stroke measures (CSTK) for a total of 13 measures.	Standardized Measures: 8 inpatient STK measures and 10 comprehensive stroke measures (ischemic and hemorrhagic) (CSTK) for a total of 18 measures.
Research	N/A	N/A	N/A	Participates in patient-centered research that is approved by the IRB
Review Process	One Reviewer, One Day	One Reviewer, One Day One Reviewer, Two Days (if Performing MT)	One Reviewer, Two Days	Two Reviewers, Two Days