

Level 1: Comprehensive

Level 2: Primary Stroke Center

Level 3: Advanced Stroke Capable Hospital

Level 4: Basic Stroke Capable Hospital

Level 1 - Comprehensive Stroke Center

- All Criteria for Primary Stroke Center Plus:
- Personnel with Expertise in Vascular Neurology, Neurosurgery, Neuro-radiology, Critical Care Specialists, Advanced Practice Nurses, Rehabilitation Specialists including Physical, Occupational, and Speech Therapy
- Advanced Diagnostic Techniques including MRI, MRA, CT/CTA, Cerebral Angiography, and TEE
- Capability to Administer Intravenous and Intra-arterial Alteplase
- Capability to Perform Carotid Endarterectomy/Stenting, Intracranial Vessel Angioplasty/Stenting, Aneurysm Clipping/Coiling, Endovascular Ablation of AVM's
- Supporting Infrastructure including 24/7 Operating Room, Interventional Neuro-radiology, and Neuro-Critical Care Support
- Stroke Registry
- Educational and Research Programs
- Utilize telemedicine network

Level 2 - Primary Stroke Center

- TJC Certified Primary Stroke Center,
- 24/7 Stroke Team Availability,
- Written Care Protocols,
- Transfer Agreement with a hospital capable providing a higher level of care,
- ED Personnel Trained in Stroke Care
- Capability to Administer Intravenous Alteplase
- Dedicated Stroke Unit,
- Neurosurgery Available within 2 Hours,
- Physician Medical Director with Expertise in the Treatment of Stroke,
- Hospital Administration Commitment and Support for Excellence in Stroke Care,
- Neuro-imaging and Lab Services Available 24/7
- Outcomes and Quality Improvement Process,
- Continuing Stroke Medical Education for ED and Team Members,
- Provide Public and Professional Educational Programs in the Community and EMS
- Written protocol for receiving stroke patients transferred from other facilities
- Utilize telemedicine network

Level 3 – Advanced Stroke Capable Hospital

- May not have all the non-acute care capabilities required of Primary Stroke Center
- Written Agreement with Level 1-2 Stroke Center for Collaboration and Support Including Potential Acute Transfer,
- Protocols for EMS Stroke Alert Process, IV Alteplase Therapy (drip and ship), ED Stroke Alert Process.
- Neuro-imaging and Lab services available 24/7,
- Hospital Administration Support
- Physician Medical Director with Expertise in the Treatment of Stroke,
- ED Personnel with Training in Acute Stroke Care,
- NIHSS Employed in Initial Acute Stroke Evaluation,
- Clearly Defined Plan for Neurosurgical, Interventional Neuro-radiology, and Endovascular Services Access,
- Sponsor Professional and Public Stroke Education in the Community.
- Outcomes and Quality Improvement Process
- Utilize telemedicine network
- Continuing education hours defined for stroke team members. 6 hours of stroke continuing education on a bi-annual basis for stroke team members. Definition of stroke team: must include a Director (physician or mid-level provider) and a Stroke Coordinator (RN or LPN). The Director and Coordinator can be the same person, but it is recommended the stroke team consist of at least 2 people.
- Written protocol for receiving stroke patients transferred from other facilities

Level 4 – Basic Stroke Capable Hospital

- Defined Plan for Immediate Transfer to a Level 1, 2 or 3 Stroke Center
- May Admit Non-Alteplase Eligible and Non-Acute Stroke Patients
- Immediate consultation with Neurologist for possible transfer to a higher level stroke center recommended
- Defined plan for immediate transfer
- EMS Agreements for Services
- Hospital Administration Support
- ED Personnel with Training in Acute Stroke Care,
- NIHSS Employed in Initial Acute Stroke Evaluation,
- Promote Professional and Public Stroke Education in the Community,
- Outcomes and Quality Improvement Process
- Continuing education hours defined for stroke team members. 6 hours of stroke continuing education on a bi-annual basis for stroke team members. Definition of stroke team: must include a Director (physician or mid-level provider) and a Stroke Coordinator (RN or LPN). The Director and Coordinator can be the same person, but it is recommended the stroke team consist of at least 2 people.
- Utilize Telemedicine network