



CDE #36487

'The Worst Headache

Time Is a Critical Factor for Stroke Treatment

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As 9-1-1 telecommunicators, our duty is not only to make sure callers get help quickly, but also that they receive the most appropriate and effective response for their particular situation. This is seldom truer than with victims of stroke.

As the caller describes the person's symptoms, the All Callers Interrogation guidecard will help you determine that the person is possibly suffering a stroke. Perhaps the caller will be able to accurately tell you that the last time the patient presented with normal signs and symptoms was 45 minutes prior to the 9-1-1 call.

But only proper training and quick thinking will inform you that advanced life support (ALS) is dispatched within one minute and en route within two minutes; that EMS providers arrive on scene within eight minutes of the initial 9-1-1 call. The responders will also know it takes 30 minutes to get to the stroke center from that location by ground or eight minutes by air.

Why are these times important to the telecommunicator? What is the difference

between the local emergency department (ED) and an ED that is designated as a stroke center? What importance does time have in the event of a stroke?

TICKING CLOCK

Years ago we were introduced to the term "heart attack" as the description for a myocardial infarction. Through public education and extensive training, emer-

thinking and efficient response.

Medical studies have demonstrated that the majority of strokes should be treated with the same urgency as if the patient were having a heart attack.¹ Getting to the right hospital in the right time frame—within three hours of onset—can have lasting positive effects and often minimize the long-term disability a stroke can cause.

"Each year, nearly 800,000 people suffer a stroke"



Why is there a need to act fast? The majority of strokes can be treated with a drug called tis-

sue plasminogen activator (tPA), which dissolves artery-obstructing bloodclots. According to the National Institute of Neurological Disorders and Stroke (NINDS), "The window of opportunity to use tPA to treat stroke patients is three hours, but to be evaluated and receive treatment, patients need to get to the hospital within 60 minutes." A five-year clinical trial conducted by NINDS found that selected stroke patients who

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