Dear EMS provider,

We are excited to share with you an advancement in how Hartford Hospital manages acute stroke patients. Previously, most patients presenting beyond 6 hours from symptom onset were ineligible for endovascular intervention. Based on recent studies and our system’s acquisition of advanced image processing technology (RAPID CT Perfusion imaging), we are now able to provide endovascular interventions for select acute stroke patients out to 24 hours from symptom onset/last known-well time. This capability is available either in-house or on-call 24/7.

We now triage patients from the field as an “Activated Stroke” who present with:

- Unilateral limb weakness or aphasia
  AND
- Last known well time within 24 hours

We are asking EMS providers, when transporting patients with the above criteria to Hartford Hospital, to please implement the Connecticut EMS Stroke Protocol (2.22) measures including:

- Routine patient care including vascular access
- Obtain blood glucose measurement
- Perform FAST exam/Cincinnati Pre-hospital Stroke Scale and reassess every 15 minutes
- Clearly determine last known well time
- Provide early notification and a “Stroke Alert”
- Rapidly/safely transport the patient without delay to the receiving hospital
- Acquire 12 lead ECG if available

It is anticipated that other Hartford Healthcare (HHC) Hospitals (see list below) will also soon be implementing this expanded activated stroke criteria and transfer eligible patients for endovascular intervention. The timeline for implementation at HHC hospitals will vary depending on when the imaging software is able to be upgraded. We'll send out updates as this capability becomes increasing available. HHC hospitals include:

- Hartford Hospital
- Hospital of Central Connecticut – Bradley Campus
- Hospital of Central Connecticut – New Britain Campus
- Midstate Medical Center
- William H. Backus Hospital
- Windham Hospital

Thank you for the excellent prehospital care you all provide and have a nice weekend.

Dave