



Systems of care are tailored by states or regions and locally implemented to meet the needs and challenges of an area, but should be based on the latest scientific guidelines. The ideal system of care provides patients with seamless transitions from each stage of care to the next. There are gaps and needs at each stage of this care continuum, however, that could be addressed by more coordinated care. Examples include:

### **Emergency Medical Services**

- Only 27% of those surveyed were aware of five heart attack warning signs and symptoms and indicated they would first call 9-1-1 if they thought someone was having a heart attack or stroke. Approximately half of patients delayed hospital arrival by at least four hours from onset of acute heart attack symptoms.<sup>1</sup>
- Pre-hospital electrocardiograms (ECGs) can significantly reduce the time to treatment for patients with the deadliest type of heart attack, but only 10% of our nation's EMS vehicles are outfitted with this equipment.<sup>1</sup>
- According to data from the Paul Coverdell National Acute Stroke Registry, stroke patients transported by ambulance were significantly more likely to arrive at the hospital within two hours of symptom onset, compared with those transported by other means. Patients arriving by ambulance also had significantly shorter waiting times once arriving at the hospital.<sup>11</sup>

### **Acute Care**

- Only a small fraction of eligible stroke patients receive thrombolytic therapy to restore blood flow to the brain following an ischemic stroke. Patients who receive this therapy within 90 minutes of symptom onset are almost three times more likely to have favorable outcomes three months after a stroke than those who do not receive it.<sup>3</sup>
- After one state hospital implemented new protocols to speed up treatment for patients with the deadliest type of heart attack, the percent of patients treated within 90 minutes increased from 28% to 71%. Faster treatment also reduced the average hospital stay.