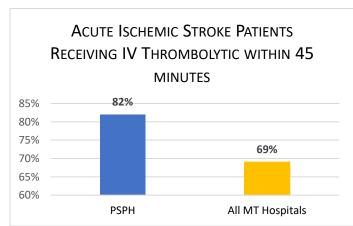
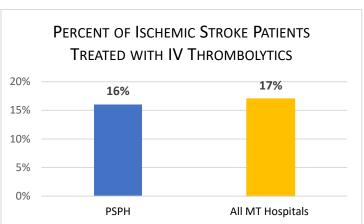
The stroke program at Providence St. Patrick Hospital (PSPH) has been recognized several years in a row for our commitment to provide excellent care to our patients. We are a Joint Commission-certified Advanced Primary Stroke Center. PSPH has achieved the highest recognition for quality and speed, Get With The Guidelines®—Stroke Gold Plus Achievement Award with Target: Stroke Honor Roll Elite and Target: Type 2 Diabetes Honor Roll. The award recognizes 85 percent or higher adherence to quality indicators for two or more years, and measures to increase how quickly clot-busting thrombolytics are administered in eligible patients who present with stroke symptoms.

PSPH is also proud to be the first hospital in Montana to offer mechanical thrombectomy for stroke in 2011. Removing the clot from the artery is the most important medical innovation for stroke in the past decade.

Below are highlights from our 2022 report.

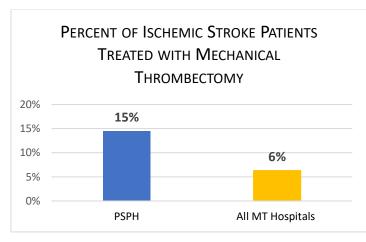
The window of treatment for IV thrombolytics, or clot busting drugs, is 4 ½ hours from onset of stroke symptoms. The target for time to treatment with IV thrombolytic is within 45 minutes of arrival at the emergency department. Therefore, it is important that the public be educated about stroke symptoms, so they know to call 911 promptly for stroke symptoms, and that emergency department providers be able respond quickly to patients who present with stroke symptoms. The number of patients receiving IV thrombolytics has steadily increased in Montana thanks to increased public awareness, use of telestroke in emergency departments and coordinated efforts to rapidly assess and treat patients.

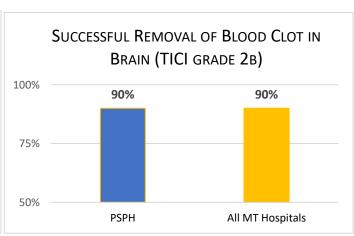




Patients who have a large clot and arrive to the hospital within 24 hours of stroke onset may be eligible for clot retrieval, AKA mechanical thrombectomy. In 2022, St. Patrick Hospital performed 41 thrombectomies. Although the window for treatment is 24 hours, the sooner a patient arrives, the more likely it is that the patient's symptoms will be reduced or even reversed by thrombectomy.

Successfully removing the clot from the brain takes skill and specialized training. Montana has 3 hospitals which perform mechanical thrombectomy. St. Patrick Hospital is the only hospital in the western region that provides this service and has done so for over 10 years. We have 5 interventional radiologists who perform this procedure who are available 24/7/365.





To effectively measure functioning after discharge, patients are assessed at 90 days post intervention using a modified Rankin scale (mRS). A score of 2 or less is considered independent living and able to carry out most everyday activities. 48% of patients treated with mechanical thrombectomy at St. Patrick Hospital achieved a score of 2 or less. By comparison, studies have found that among patients with strokes of similar severity, only 13% of patients who did not receive this intervention achieved scores of 2 or lower.





*mRS 0=no symptoms; mRS 1= no significant disability despite symptoms; mRS 2= slight disability

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As soon as the patient enters the hospital, caregivers initiate specific stroke interventions to prevent complications associated with stroke, including another stroke. St. Patrick Hospital is recognized by the American Heart/Stroke Association for high quality of care and meeting stroke specific standards of care.

Core Stroke Measures	2021 Q1	Q2	Q3	Q4	2022 Q1	Q2	Q3	Q4
Venous Thromboembolism	98%	100%	100%	100%	92%	100%	96%	98%
Discharged on Antithrombotic	100%	100%	100%	100%	100%	100%	100%	100%
Anticoagulation Therapy for Atrial	100%	100%	100%	100%	100%	100%	100%	100%
Thrombolytic (arrive in 2 hrs, given in 3 hrs)	100%	100%	100%	100%	100%	100%	100%	100%
Antithrombotic By End of Day 2	100%	100%	100%	100%	100%	100%	100%	100%
Discharged on Statin	100%	100%	100%	100%	100%	100%	100%	100%
Stroke Education	100%	100%	100%	97%	88%	97%	96%	97%
Assessed for Rehab	100%	100%	100%	100%	100%	100%	100%	100%
	Green≥95%				Red < 95%			