Meeting Minutes*

Meeting Title	**STEMI & Stroke Advisory Committee Meeting**
Meeting Location	The Belhaven & Webex
Meeting Date	May 28, 2026
Called to Order @	6:00 p.m.
In Attendance "☒" **STEMI Members "**"** **Stroke Members "*"**	☒ Dr. Harper Stone (Chair)** ☒ Dr. Barry Bertolet (Co-Chair)** ☐ Dr. Jason Waller** ☒ Dr. Trey "John" Wofford** ☐ Dr. Brett Kathmann** ☐ Mr. Derrick Bush, RN** ☐ Mr. Kelly Cumbest, RN** ☐ Ms. Heather Reid, MSN** ☐Dr. Arie Szatkowski** ☐ Dr. Chris Waterer** ☐ Ms. Finley Boyd, RN** ☒ Ms. Melissa Stampley, RN** ☐ Ms. Ginny Hudson, RN** ☐ Ms. Lara Haynes** ☐ Mr. Robert Ware, DNP** ☒ Ms. Jada Coker, NRP** ☐ Mr. Kevin Smith, NRP** ☐ Ms. Joanna Herring ** ☒ Ms. Bridget Watkins, RN** ☒ Mr. Chuck Carter, RN, NRP** ☐ Dr. Paul Levy** ☒ Ms. Alex Lennep** ☒ Mr. Will Appleby** ☒ Ms. Amber Nesensen** ☐ Ms. Trish Watts** ☐ Ms. Cristina Jones** ☒ Ms. Kristin Isom** ☐ Mr. Nathan Mclntosh* ☒ Dr. Ruth Fredericks (Chair)* ☐ Dr. Paul Bradley* ☒ Dr. Sean Dukes* ☒ Dr. William Evans* ☐ Dr. David Hooker, MD* ☐ Dr. James Kolb* ☐ Ms. Laura Nikki Kelleway* ☐ Ms. Amber Roberts, RN* ☐ Ms. Alicia Grant, RN* ☐ Ms. Wendy Barrilleaux, PT, DPT* ☒ Ms. Belinda Sanderson, RN* ☐ Ms. Sonya Collums, RN* ☐ Ms. Paula Metzger* ☐ Ms. Vickie Buchanon* ☐ Mr. Mickee Ramsey, NRP* ☒ Mr. Evan McGlothin* ☐ Mr. David Grayson* ☐ Ms. Kolandra Rucker, NRP* ☒ Mr. Scott Stinson, NRP* ☐ Mr. Neal Kiihhl, BSN* ☐ Ms. Heather Sudduth, OTR/L* ☐ Dr. Kunal Bhatia* ☒ Ms. Mara Hare* ☒ Ms. Teresa Ellerbush ☒ Mr. Brad Harris* ☐ Ms. Jennifer Golman* ☐ Ms. Casey Langford*

Meeting Minutes*

		☒ Ms. Teresa Windham*
Ex Officio Members Present	☒ Ms. Patricia Freeman ☒ Ms. Sara Strazalka ☒ Ms. Angie Carter	☒ Ms. Elizabeth Day, RN ☒ Mr. Jon Wright ☒ Ms. Kayla Johnson
Others present	☒ Ms. Ashlin Dickerson ☒ Ms. Jada Clayton ☒ Ms. Brittany Pierce ☒ Mr. Clyde Deschamp ☒ Dr. Jason Stacey ☒ Mr. Jay Scott	☒ Ms. Mallory Quinn ☒ Ms. Samantha Seevers ☒ Dr. Thad Waites ☒ Ms. Nicole Smith ☒ Ms. Shelby Sullivan

Meeting Minutes*

	AGENDA TOPIC	NOTE
I	Call to Order	Dr. Stone called the meeting to order.
II	Roll Call	Ms. Day called the roll; a quorum was present.
III	Review of Minutes a. MHCA Quarterly Meeting	M:? Second:? Approved – none opposed.
IV	Reports a. Office of EMS & ACS b. Mississippi Healthcare Alliance i. MHCA Financial Update ii. Rapid AI Update c. AHA	**Office of EMS & Acute Care Systems:** Ms. Day provided updates**:** • The office of EMS & ACS had a meeting with the Interventionalists back in March and this past Tuesday. They are putting together a work group to analyze one quarter's worth of data, focusing on the time the patient departed from the original hospital to the time they arrived at the higher level of care. • Mr. Jonathan "Jon" Wright will now be overseeing the CARES program. Mr. Wright reported that the 2025 CARES annual report has been released and includes MS data. It was noted that public use of AEDs occurred in 19% of cases, exceeding the national average of 14%, and CPR being initiated by bystanders occurred in 46% of the time, versus 43%. • Ms. Day shared an updated map of the Designated STEMI Receiving Centers. All 21 centers are designated by the Dep of Health. • Ms. Day shared an updated map of the Designated Stroke Centers. Memorial Hospital at Gulfport moved up from level 2 to level 1. **MHCA Report**: Ms. Freeman provided updates: • Ms. Finley Boyed has resigned from her position as North Regional STEMI Coordinator. Appreciation was expressed for her contributions and service in the coordinator role. • Ms. Freeman thanked St. Dominic's for recognizing EMS personnel with a room full of snacks and sandwiches for EMS week. Positive feedback was received from EMS staff regarding the event. Ms. Freeman encouraged others to submit photos from EMS Week celebrations to include on the MHA website. **MHCA Financial Update:** Ms. Carter provided updates: • Income o 41000 MSDH Grants: $244,139.75 o 41500 Other Income: $20,950.00 o Total for Income: $265,089.75 • Expenses – detailed list shared with the committee. **Rapid AI:** Ms. Strzalka provided updates:

	AGENDA TOPIC	NOTE
		• Members were informed of the upcoming RAPID platform upgrades for MHCA hospitals. • Funding was received this year to implement the RAPID NCCT Stroke module. Nine hospitals have been selected for the deployment of the module. • A new CPT code was sent out in January of this year. If your hospital is utilizing Rapid, please take advantage of the CPT code. Also, a new Rapid app update for filters and GO features has been added. • April 1, 2025, to April 30, 2026, RAPID AI Utilization Analysis shows 17,780 successful scans with only 140 unsuccessful. • Ms. Strzalka stated that the numbers are small for the ICH volume chart. If your hospital would like individual data, please contact Ms. Strzalka to review your data. The highest volume center for ICH was South Central Regional Medical Center, with 132 positive ICH patients. • The LVO module shows that 32 patients at Greenwood Leflore were identified during that year as having positive LVO. • The Perfusion sites that are showing one through them were test scans. Copiah County Medical Center has the highest volume of perfusion sites with 6, and Singing River Hospital – Ocean Springs, Pascagoula, and Gulfport are 2nd with 2. **2026 AIS Guideline Update:** Ms. Isom provided updates: • Ms. Isom compared the 2019 guidelines with the new 2026 guidelines. The top 10 takeaways are: ○ Thrombolytic, Pediatric Stroke, Thrombetomy (EVT) Window, Posterior Circulation Stroke, Advanced imaging Role, pre-Hospital Care, Blood Pressure Management, System Level, Minor Stroke, and Early Anticoagulation. • Ms. Isom shared a new graphic that shows the patient continuum for a stroke patient. Ms. Isom also shared a list of resources that are available on the AHA website. • Abstraction workshops will be held on that Friday after the statewide quarterly meetings moving forward.

V	STEMI Advisory Report: Aggregate Data	**Aggregate Data:** Dr. Stone provided updates:
		• Pre-Hospital STEMI Patients
		  ○ Metric: Symptom Onset to Arrival for POV Patients in Median Min 11020. MS: 101 min. The Nation: 120
		  ○ Metric: Symptom Onset to FMC in Median Min. MS: 60 min 11022. The Nation 57 min.
		• Metric: Pre-Hospital ECG Percentage STEMI Pts Arriving by EMS 11012
		  ○ MS: 91.13%, The Nation: 84.93%

	AGENDA TOPIC	NOTE
		○ By Region: Northern 94.06%, Central 86.67%, Southern 92.12% • Metric: Median Time (Min) FMC to Device 11013 ○ MS: 89 min. The Nation: 83 min. ○ By Region: Northern 89, central 86.8, Southern 90.5 • Metric: FMC to Device ≤ 90 Min by Percentage 7653 ○ MS: 86.67%. The Nation: 82.89% ○ By Region: 88.35%, Central 79.47%, Southern 79.41% • Metric: Time to Primary PCI among Transferred Pts 120 min. 8940 ○ MS: 76.26%. The Nation: 78.13% ○ By Region: Northern 77.61%, Central 38.71%, Southern 89.89% • STEMI Transfer for Primary PCI. ○ 2025 Q4: Median DIDO (11007) 64 & 1st Arrival to PCI Median Min (11006) 64. ○ By Region: Northern DIDO 64 – 1st ED Arrival to PCI 121. Central DIDO 84 – 1st ED Arrival to PCI 155. Southern DIDO 48 – 1st ED Arrival to PCI 114. • Metric: Pts with Hospital Arrival to ECG ≤ 10 min in % 9009 ○ MS: 75.16%. The Nation 69.48% ○ Northern 78.01%, Central 70.09%. Southern 76.00% • Metric: Median Minutes from Hosp Arrival to Device (D2B) 11019 ○ MS: 61 min. The Nation: 56 min ○ Northern 56 min, Central 68 min, Southern 61 min. • In Hosp Risk Standardization mortality. Patients in Percentage 8461 ○ MS: 5.24%. The Nation: 52.26%. We do not have the numbers for this 4Q.
VI	STEMI Performance Improvement Committee	**Performance Improvement Committee Report:** Dr. Bertolet provided updates: • Improvements have been seen in EMS performance related to obtaining pre-hospital EKGs, particularly in the central region. STEMI receiving center ERs have also been improving at doing EKGs in a timely fashion. • Statewide transfer in times also shows improvement.
VII	STEMI New Business	No new business
VIII	Stroke Advisory Report: Aggregate Date	**Aggregate Data:** Dr. Fredericks provided updates: • Arrival Mode by Percentage AHASTR19 ○ Transfer from other Hosp - US: 18.3%, MS: 20.7%, MS-North: 6.9%, MS-Central: 36.8% & MS-South: 7.9%. ○ POV- US: 34.5%, MS: 39.0%, MS-North: 49.5%, MS-Central: 29.4%, & MS-South: 42.3%

	AGENDA TOPIC	NOTE
		○ EMS – US: 46.5%, MS: 40.1%, MS-North: 43.6%, MS-Central: 33.8% & MS-South 49.2% • Pre-Notification % Pts with Advanced Notification to Hops EMS AHASTR39 ○ MS: 61.1%. US: 58.7% ○ By Region: North 81.9%, Central 31.8%, South 76.4% • Non-Contrast Brain CT or MRI Interpreted within 45 Min of Presentation AHASTR272 ○ MS: 73.2%. The US: 70.8% ○ By Region: North 73.1%, Central 78.8% & South 70.1% • Door to IV LYTIC <60 Min By Percentage AHASTR13 ○ US: 90.9%. MS: 81.1% ○ By Region: North 75.5%, Central 85.5%, South 82.9% • Number of MS Interventions by Region ○ Total for MS 400 ○ By Region: South 73, Central 254, North 73 • Top Reasons for Delay in MS 2025 Q4: IV Lytics Beyond 60 Min by Percentage 51 patients. (This varies by center) ○ Care team unable to determine eligibility 19.60% - HTN 15.70% - Refusal 7.80% - In-hospital time delay 7.80% - Delay in stroke diagnosis 5.90% - Need for additional imaging 5.90% - Other 3.90% - Management of concomitant emergent conditions 2.00%. • Door to Door within 60 min for Pts Txfd from OSH OR 90 min for Pts presenting directly (24 hr. treatment window) ○ MS: 27.6%. US:54.1% • Rick adjusted Mortality ratio Global Stroke Model AHASTR60 ○ MS: 1.91, US: 1.35 ○ By Region: North 1.27, Central 2.77, South 1.25. • Top 5 Discharge Dispositions for MS Stroke Patients 1/1/2025 – 12/31/2025 ○ Home 49.0% - Acute Care Facility 16.5% - IRF 12.8% - SNF 9.2% - Expired 5.0%.
IX	Stroke Performance Improvement Committee	**Performance Improvement Committee Report:** Dr. Evans provided updates. • MS performed at or above the national benchmark for Thrombolytic less than 60 min and less than 45 min. • The PI committee has sent out the scorecards for a little over a year. The scorecards help facilities know where they are in relation to the region and in relation to the state. The committee plans to ask for more feedback and to provide education to facilities missing thrombolytic times.

Meeting Minutes*

	AGENDA TOPIC	NOTE
X	Stroke New Business	No new business.
	Upcoming Meeting	August 20, 2026 November 19, 2026

ACTION ITEMS			
#	**Step**	**Person (s) Responsible**	**Due Date**
1.			
2.			