



# Meeting Minutes\*



<b>Meeting Title</b>	<b>STEMI &amp; Stroke Advisory Committee Meeting</b>	
<b>Meeting Location</b>	Zoom	
<b>Meeting Date</b>	3.07.2024	
<b>Called to Order @</b>	6:00 p.m.	
<b>In Attendance “☑”</b> <b>STEMI Members “***”</b> <b>Stroke Members “**”</b>	<input checked="" type="checkbox"/> <b>Dr. Harper Stone, MD (Chair)**</b> <input checked="" type="checkbox"/> <b>Dr. Jason Waller, MD**</b> <input checked="" type="checkbox"/> <b>Dr. Barry Bertolet, MD**</b> <input checked="" type="checkbox"/> <b>Dr. Paul Levy, MD**</b> <input checked="" type="checkbox"/> <b>Ms. Jada Coker, NRP**</b> <input checked="" type="checkbox"/> <b>Ms. Bridget Watkins, RN**</b> <input type="checkbox"/> <b>Dr. Chris Waterer, MD**</b> <input checked="" type="checkbox"/> <b>Mr. Chuck Carter, RN, NRP**</b> <input type="checkbox"/> <b>Ms. Debra Cox, RN**</b> <input checked="" type="checkbox"/> <b>Ms. Laura Watrous, RN**</b> <input type="checkbox"/> <b>Dr. Harvey Mason, MD**</b> <input type="checkbox"/> <b>Ms. Heather Sistrunk**</b> <input type="checkbox"/> <b>Mr. Kevin Smith, NRP**</b> <input checked="" type="checkbox"/> <b>Ms. Melissa Stampley, RN**</b> <input type="checkbox"/> <b>Ms. Ginny Hudson, RN**</b> <input type="checkbox"/> <b>Ms. Kim Cleland, RN**</b> <input type="checkbox"/> <b>Ms. Holly Rodriguez**</b> <input checked="" type="checkbox"/> <b>Dr. Thad Waites, MD**</b> <input type="checkbox"/> <b>Dr. Richard Summers, MD**</b> <input checked="" type="checkbox"/> <b>Dr. Brett Kathmann, MD**</b> <input type="checkbox"/> <b>Ms. Cheryl Berry, RN**</b> <input type="checkbox"/> <b>Ms. Keesha Medley, RN**</b> <input checked="" type="checkbox"/> <b>Ms. Christy McGregor, RN**</b> <input type="checkbox"/> <b>Ms. Stephen Houck, NRP**</b> <input checked="" type="checkbox"/> <b>Ms. Kristen Isom, RN**</b> <input type="checkbox"/> <b>Mr. Leslie Duke, NRP**</b> <input checked="" type="checkbox"/> <b>Mr. Roger Swayze**</b>	<input checked="" type="checkbox"/> <b>Dr. Ruth Fredericks, MD (Chair)*</b> <input checked="" type="checkbox"/> <b>Ms. Teresa Ellerbusch, RN*</b> <input type="checkbox"/> <b>Ms. Ashley Joyner, RN*</b> <input checked="" type="checkbox"/> <b>Ms. Mickee Ramey*</b> <input checked="" type="checkbox"/> <b>Mr. Scott Stinson*</b> <input type="checkbox"/> <b>Ms. Heather Sudduth*</b> <input type="checkbox"/> <b>Ms. Kristen Isom*</b> <input checked="" type="checkbox"/> <b>Ms. Lee Waldrop, RN*</b> <input type="checkbox"/> <b>Mr. Neal Kiihnl, RN*</b> <input checked="" type="checkbox"/> <b>Dr. William Evans, MD*</b> <input type="checkbox"/> <b>Ms. Vickie Buchanon*</b> <input type="checkbox"/> <b>Mr. Sam Marshall*</b> <input type="checkbox"/> <b>Mr. David Grayson*</b> <input checked="" type="checkbox"/> <b>Ms. Kolandra Rucker*</b> <input checked="" type="checkbox"/> <b>Ms. Wendy Barrilleaux*</b> <input type="checkbox"/> <b>Dr. James Kold, MD*</b> <input type="checkbox"/> <b>Ms. Laura Nikki Kelleway*</b> <input type="checkbox"/> <b>Ms. Heather Sistrunk*</b> <input type="checkbox"/> <b>Ms. Katie Schussler*</b> <input type="checkbox"/> <b>Ms. Paula Metzger*</b> <input type="checkbox"/> <b>Dr. Paul Bradley, MD*</b> <input checked="" type="checkbox"/> <b>Ms. Alicia Grant*</b> <input checked="" type="checkbox"/> <b>Dr. Shreyas Gangadhara, MD*</b> <input checked="" type="checkbox"/> <b>Ms. Belinda Sanderson, RN*</b> <input checked="" type="checkbox"/> <b>Mr. Evan McGlothlin*</b> <input type="checkbox"/> <b>Ms. Gayle Elliott, RN*</b>



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		<input type="checkbox"/> Ms. Milisa Walter, RN* <input type="checkbox"/> Ms. LaSharda Leasy* <input type="checkbox"/> Ms. Karyn Dean*
<b>Ex Officio Members Present</b>	<input checked="" type="checkbox"/> Ms. Teresa Windham, RN <input checked="" type="checkbox"/> Ms. Elizabeth Day, RN	<input checked="" type="checkbox"/> Ms. Katianna McMillen
<b>Others present</b>	<input checked="" type="checkbox"/> Ms. Terri Tutor <input checked="" type="checkbox"/> Ms. Brandy Williams <input checked="" type="checkbox"/> Ms. Allison Grant <input checked="" type="checkbox"/> Ms. Angie Carter <input checked="" type="checkbox"/> Mr. David Barrett <input checked="" type="checkbox"/> Dr. Keith Jones <input checked="" type="checkbox"/> Mr. Jeffrey Whitfield <input checked="" type="checkbox"/> Mr. Jon Wright <input checked="" type="checkbox"/> Ms. MaCalla Matthews <input checked="" type="checkbox"/> Mr. Patrick Graham <input checked="" type="checkbox"/> Ms. Kunal Bhatia <input checked="" type="checkbox"/> Mr. Tyler Blaylock <input checked="" type="checkbox"/> Mr. Ryan Wilson <input checked="" type="checkbox"/> Mr. Lester Carpenter	<input checked="" type="checkbox"/> Mr. David Barrett <input checked="" type="checkbox"/> Dr. David Hooker, MD <input checked="" type="checkbox"/> Ms. Amber Herron <input checked="" type="checkbox"/> Mr. Clyde Deschamp <input checked="" type="checkbox"/> Mr. Dennis McDill <input checked="" type="checkbox"/> Ms. Jackie W. Norris <input checked="" type="checkbox"/> Mr. Jim Craig <input checked="" type="checkbox"/> Ms. Karen Breland <input checked="" type="checkbox"/> Ms. Mary Brooks Thigpen <input checked="" type="checkbox"/> Mr. Sean Duke <input checked="" type="checkbox"/> Ms. Jameka Stuckey <input checked="" type="checkbox"/> Mr. Matt Hall <input checked="" type="checkbox"/> Ms. Susan Bellow <input checked="" type="checkbox"/> Mr. Donnie Scroggins

APPROVED



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	AGENDA TOPIC	NOTES
I	Call to Order	Dr. Stone called the meeting to order.
II	Roll Call	Ms. McGregor roll call with quorum present
III	Review of Minutes	M – Dr. Bertolet 2 <sup>nd</sup> – Tyler Blalock Approved – none opposed.
IV	Reports <ol style="list-style-type: none"> <li>a. Office of EMS &amp; ACS</li> <li>b. Mississippi Healthcare Alliance               <ol style="list-style-type: none"> <li>i. CARES Update</li> <li>ii. Financial Update</li> </ol> </li> </ol>	<b>Office of EMS &amp; Acute Care Systems:</b> Ms. Windham provided updates: <ul style="list-style-type: none"> <li>• Designations: Ms. Windham asked If you would send your STEMI or stroke letter of application, the MSDH would help get your designation complete. Ms. Windham introduced Ms. Day to the committee and her role with the systems of care.</li> </ul> <b>MHCA Report:</b> Ms. McGregor provided updates: <ul style="list-style-type: none"> <li>• The coordinators meetings for STEMI &amp; Stroke will be April 11 at BMH- NM, Oxford. The meetings for August 8 and November 7 are TBD.</li> <li>• CARES 2023 data should be wrapped up.</li> </ul> <b>MHCA Report:</b> Ms. Carter provided updates: <ul style="list-style-type: none"> <li>• As of March 3, 2024, the balance in the bank account is \$467,512.78. Ms. Carter presented a review of the account and the amount spent.</li> </ul>
V	STEMI Performance Improvement Committee Report <ol style="list-style-type: none"> <li>a. Aggregate Data</li> </ol>	<ol style="list-style-type: none"> <li>a. <b>Aggregate Data:</b> Dr. Stone provided updates:               <ul style="list-style-type: none"> <li>• <b>Symptom Onset to Arrival: Median Minutes: Rolling 4Q (2022Q4-2023Q3)</b> POV Arrival STEMI Patients Metric 11020: MS 120 min. Nation 120 min. When this started, MS took longer than anybody in the nation. MS average was at 126min, the national average was 116min. Due to our public service campaign, this has dropped.</li> <li>• <b>Symptom Onset to Arrival: Median Minutes: Rolling 4Q (2022 Q4-2023Q3)</b> EMS Arrival STEMI Patients Metric 11022: MS 48 min. Nation 54 min.</li> <li>• <b>STEMI Mode of Arrival in Percentage: Rolling 4Q (2022Q4-2023Q3).</b> Metric 8898: 3Q EMS vs. POV. EMS is at 45.2% and POV is at 54.8%. MS and National Trends. MS is at 54.8% and the Nation is at 61.7%.</li> <li>• <b>STEMI Patients with Pre-Hospital ECG: In Percentage: Rolling 4Q (2022Q\$-2023Q3).</b> Metric 11012: 2023Q3 MS 88%. Nation 90.3%. MS is still below the national average.</li> <li>• <b>FMS to Device Time ≤ 90 Min in Percentage: EMS and Hospital Arrival: Rolling 4Q (2022Q4-2023Q3)</b> Metric 37: 2023Q3 MS 83.4%. Nation 85%.</li> <li>• <b>FMC to Device Time in Median Minutes: EMS and Hospital Arrival. Rolling 4Q (2022Q4-2023Q3).</b> Metric 11013: MS is at 92 min and the Nation is at 84 min.</li> </ul> </li> </ol>



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	AGENDA TOPIC	NOTES
		<ul style="list-style-type: none"> <li>• <b>Time to Primary PCI Among Transferred Patients in Percentage:</b> Rolling 4Q (2022Q4-2023Q3) Metric 56: MS is at 67.5% and the nation is at 76.4%.</li> <li>• <b>Median Time (Min) From First Facility ED Arrival to Primary PCI (Transferred Acute STEMI) Goal:</b> ≤ 120 min. Rolling 4Q (2022Q4-2023Q3). Metric 11006: MS 132 min and the nation is at 114 min.</li> <li>• <b>Hospital Arrival to ECG ≤ 10 Min Percentage: Rolling 4Q (2022Q4-2023Q3).</b> Metric 9009: MS 71 min and the nation is at 66 min.</li> <li>• <b>Hospital Arrival to PCI (D2B) in Median Min:</b> Rolling 4Q (2022Q4-2023Q3). Metric 11019: MS 62 min, Nation 59min.</li> <li>• <b>In-Hospital Risk Standardization Mortality: All AMI Patients Measured in Percentage 2022Q3-2023Q2.</b> Currently, we do not have the most recent mortality. This is the information from the last meeting. Metric 43: Including Cardiac Arrest, MS 5.33%, Nation 5.05%. Metric 44: Excluding Cardiac Arrest, MS 4.36%, Nation 4.12%. We have seen a 25% reduction in mortality.</li> </ul> <p><b>Performance Improvement Committee Report:</b> Dr. Bertolet and Dr. Waites provided updates:</p> <ul style="list-style-type: none"> <li>• Metric 4888: Median time (min) from hospital arrival to device to (D2B). Goal: Median Time ≤ 60 min. MS is at 62 min and US Hospitals are at 59 min. Dr. Bertolet stated that we are doing amazingly well when the goal is ≤ 90 min. MS is almost 30 min below the national standard. Individual PCI hospitals, MS is at the very pinnacle of the nation around 25 min getting someone in the Cath Lab and identifying their anatomy. EMS to first medical contact to EKG, MS is doing great and leading the nation. Also, in the Per-Hospital EKG MS is doing quite well.</li> <li>• House bill, 1629 and 1489 were mentioned earlier today at the PI Committee meeting. Dr. Bertolet stated that he thinks everyone needs to support these bills.</li> <li>• Dr. Waites stated that Dr. Edney is very interested in the data with the PI Committee regarding EMS. Dr. Edney would like the MHCA to put together the data that has been talked about and present it at the April EMSAC meeting.</li> </ul>
VI	STEMI New Business	None
VII	Minutes of the Previous Stroke Advisory Meeting	M – Dr. Bertolet 2 <sup>nd</sup> – Neal Kiihnl



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	AGENDA TOPIC	NOTES
		Approved – none opposed.
VIII	Stroke Performance Improvement Committee Report a. Aggregate Data	<p>Dr. Evans displayed a list of the designated facilities. Level 1 facilities would be able to do catheter-based intervention clot retrieval. Level 2 facilities would have 24/7 coverage to treat strokes. Level 3 would be stroke capable. Dr. Evans stated that Memorial Hospital-Gulfport does have 24/7 neuro intervention coverage.</p> <p>Dr. Evans provided updates:</p> <ul style="list-style-type: none"> <li>• <b>AHASTER19: Arrival Mode By Percentage:</b> Quarterly Data (2022Q4-2023Q3). MS 40.4%. National 45.4%.</li> <li>• <b>AHASTR 39: Pre-Notification By EMS:</b> Quarterly Data (2022Q4-2023Q3). MS 59.30%. Nation 58.80%. MS did jump up 2Q2023, but we are still doing good.</li> <li>• <b>Door To CT ≤ 20 Minutes By Percentage:</b> Quarterly Data (2022Q4-2023Q3). The goal is ≥ 50% in &lt; 20 Mins. 2023Q2 R4Q. North 39%, Central 45% and South 42%. MS 42% and the National is 44%.</li> <li>• <b>Door to IV LYTIC ≤ 60 min By Percentage:</b> Quarterly Data (2022Q4-2023Q3). Central 81.5%, North 75.0% and South 64.3%. MS 72.9% and the national is 87.4%.</li> <li>• <b>AHASTR50 Time to IV Thrombolytic Therapy Times By Percentage:</b> 2023Q3 MS median 49 min and the Nation median 40 min.</li> <li>• <b>AHASTR40 Reasons for Daley IV Thrombolytic Initiation Beyond 60 Min:</b> 2023Q3. Hypertension and Care-team eligibility are a big issue in MS and in the nation.</li> <li>• <b>Number of Interventions State Aggregate:</b> Quarterly Data (2022Q4-2023Q3) 2022Q4 80, 2023Q1 69, 2023Q2 69, 2023Q3 72 with a total number of cases 290.</li> <li>• <b>Door To Device Within 60 min for Transferred PTS or 90 mins for PTS Percentage:</b> Quarterly Data (2022Q4-2023Q3). MS 12.9%, National 45.5%. Dr. Evans and Dr. Fredericks will have a meeting with the Interventionist to go over this metric.</li> <li>• <b>AHASTR60 Risk-Adjusted Mortality Ischemic Stroke and Hemorrhagic Stroke:</b> 2Q2023 MS 2.21% and the Nation was at 1.42%. 3Q2023 MS 2.26% and the Nation is at 1.43%.</li> <li>• <b>AHASTR23 Most Common Discharge Destinations In MS:</b> MS is close with the nation.</li> </ul>



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	AGENDA TOPIC	NOTES
IX	Stroke New Business/Open Discussion	None
X	Announcements/Discussion	None
	Upcoming STEMI PIC meetings	<ul style="list-style-type: none"> <li>• June 6, 2024</li> <li>• September 5, 2024</li> <li>• December 5, 2024</li> </ul>

## ACTION ITEMS

#		Due Date
1.		
2.		

APPROVED