## Door to Needle Time for Thrombolysis pre- and post- STAT simulation training Aoife Duignan and Susan Kerr

## Introduction

- Minimising the "door-to-needle-time" (DTNT) for stroke thrombolysis is associated with improved patient outcomes (1)
- In Borders General Hospital, stroke and TIA assessment and management is led by the stroke consultant in hours, and the medical registrar out of hours
- The STAT (Stroke and TIA Assessment Training) simulation course aims to improve the recognition and management of acute stroke
- Since August 2018, all medical registrars involved in thrombolysis have received either the STAT course or personalised walk-throughs of the thrombolysis pathway
- This project assesses DTNT following the introduction of the STAT course.

## Method

- Data on DTNT is routinely collected for the Scottish Stroke Care Audit (SSCA).
- Median DTNT and change in NIHSS for three years before and eighteen months after the introduction of the STAT course (Mann Whitney-U)
- Proportion of patients thrombolysed within one hour (one of the SSCA standards (1)) was compared using a Chi-Square test.

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## Results

- with 28 post-course.
- There was a non significant increase in patients thrombolysed within 1 hour (33% to 50%, p=0.17).
- There was a non-significant fall in median DTNT (75 mins to 62 mins, p=0.10).
- This coincided with an increase in the number of patients being thrombolysed per month. • There was no change in the medial NIHSS of
- thrombolysed patients (-6 to -5, p=0.096).



DTNT was compared for 39 patients pre-course



# outcomes





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# **Proportion of Patients Thrombolysed <60 Minutes**

## Conclusions

• Small numbers limited measurement of the effect of the STAT course on DTNT or patient

• The introduction of STAT has coincided with a trend towards improvement in DTNT

• It would be valuable to assess other measures of impact of the course, such as confidence of medical registrars in the assessment of stroke patients for thrombolysis.

• We would like to thank the Northumbria Stroke Team, who developed the STAT course and Chest Heart and Stroke Scotland for funding its roll-out in NHS Borders.