## Northwestern Ontario Regional Stroke Network Telestroke Activation Report



As part of the Acute Stroke Protocol, please complete the following two steps.

1. Complete a report for each Telestroke activation regardless of if IV thrombolytics was provided or not.

2. Submit report via email: <u>nwostroke@tbh.net</u> or fax: 807-684-5883.

Telestroke Site:	Date:
Time Last Known Well:	ED Arrival Time:

Element	Target from ED Arrival Time (minutes)	<b>Time</b> (24 hr clock)	Performance from ED Arrival Time (in minutes)
ED MD contact	<=10		
<b>CritiCall contacted</b> (imaging does not have to be complete)	ASAP <sup>^</sup>		
INR drawn	<=10		
<b>CT scan</b> (time of first slice)	<=10 <sup>&amp;</sup>		
<b>CTA scan</b> (time of first slice)	<=15*		
Telestroke MD consult initiated	<=20^ (from CritiCall contact)		min. from CritiCall contact
IV thrombolytic bolus administered	<=30*		
Comments:			