

Stroke Program at Morristown Medical Center

Atlantic Health System's Stroke Program at Morristown Medical Center has received the highest awards from the American Heart Association and American Stroke Association. These awards recognize our promise to deliver excellent care to patients and families who suffer from a stroke. Morristown Medical Center has been a five-star recipient for treatment of stroke 14 years in a row, named among the top 10% in the nation for the treatment for stroke, and is the recipient of the Healthgrades Stroke Care Excellence Award™.

To achieve these awards, we must provide high-quality care in comparison to other stroke programs across the country. Quality care is identified by the following:

- Medicine called a thrombolytic is given quickly for clot-busting in ischemic stroke patients who come to the hospital less than 4.5 hours from the time the patient was last seen normal.
- Education is received on calling 9-1-1, warning signs of stroke, risk factors, seeing doctors, and the importance of follow-up care and compliance with taking medications.
- Rehabilitation needs are evaluated while in the hospital. A stroke can cause damage to the brain that makes it difficult for a person to return to normal daily activities. Rehabilitation after a stroke can help a person live with any remaining effects of a stroke and help the brain recover.
- Medicine is given at discharge to lower the risk for stroke to happen again:
 - Drugs that reduce cholesterol – “statins”
 - Drugs that prevent platelets in the blood from sticking together and making a clot (antithrombotics)
 - Drugs that are blood thinners – delay clotting of blood – sometimes given to people with irregular heartbeat (anticoagulants)
- Treatment for preventing blood clots during hospital admission

To see the latest publicly available quality data, please visit: qualitynearme.heart.org/GWTGPublicReporting

Morristown Medical Center offers **surgical procedures for critical stroke patients.**

Procedure	Morristown Medical Center 2022	All NJ Hospitals
Diagnostic Angiogram Complication Rate	<1% per year	<1% per year
CSTK-12 - Ischemic stroke patients who have adequate blood flow restored during a thrombectomy < or equal to 60 min.	77%	74%
Mechanical Endovascular Reperfusion Therapy for Eligible Patients with Ischemic Stroke who receive treatment	100%	98%

Helpful Definitions

Complication Rate: The number of patients experiencing complications related to the procedure that they had performed

CSTK-12: Grade used to measure stroke patients who are undergoing a procedure (endovascular thrombectomy) to surgically remove a blood clot from the large arteries in the brain that is blocking a blood vessel and restore the flow of blood in less than (<) or equal to 60 minutes from the time of skin puncture

Diagnostic Angiogram: Diagnostic procedure that uses imaging to show your provider how your blood flows through your blood vessels or heart

Endovascular Thrombectomy (EVT): During this procedure, a physician places a catheter through a blood vessel (artery) in the arm or leg directly up to the large blood vessel in the brain where the clot is blocking blood flow to brain tissue. The clot is then removed by inserting a device into the blood clot and pulling the clot out. It is a time-sensitive treatment.

Ischemic Stroke: Occurs when the blood supply to part of the brain is interrupted or reduced, preventing brain tissue from getting oxygen.

Mechanical Endovascular Reperfusion Therapy for Eligible Patients with Ischemic Stroke: Patients who are diagnosed with an ischemic stroke and qualify for an endovascular thrombectomy and receive one.