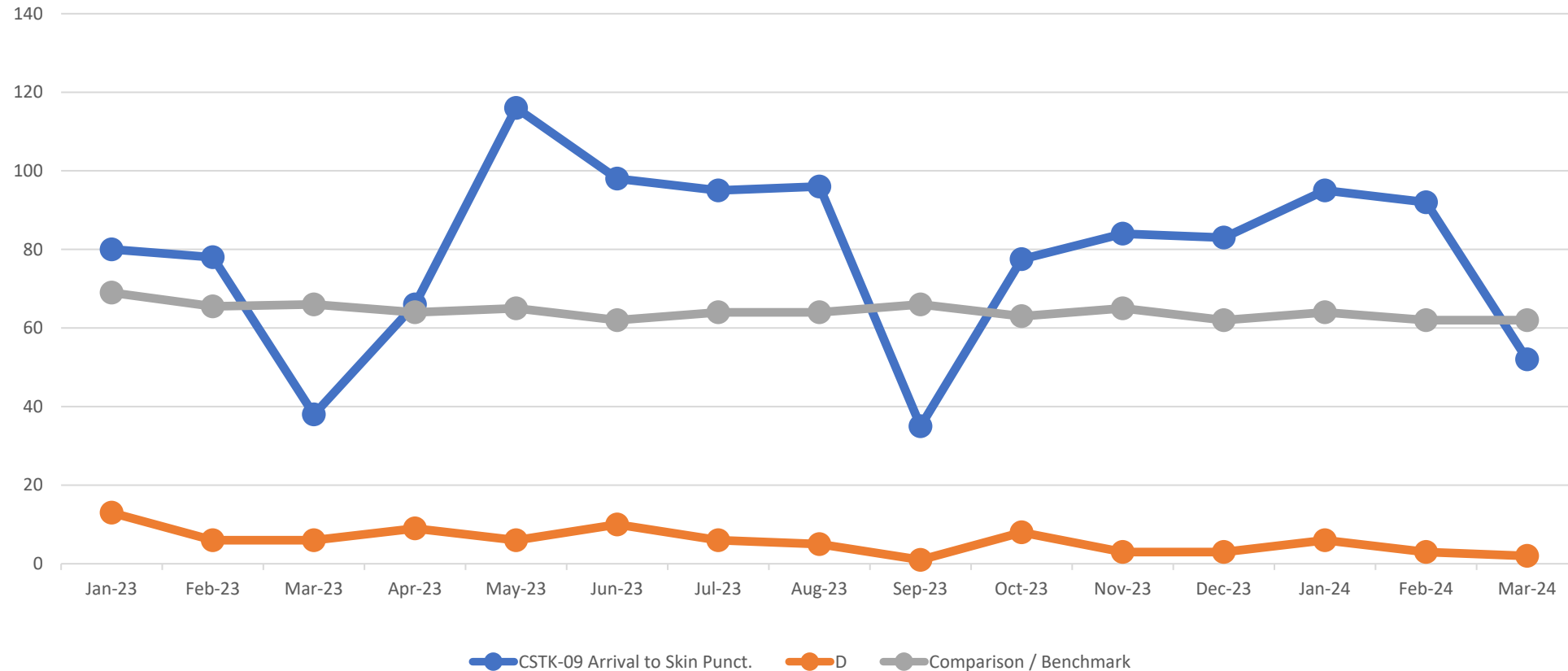# UT Health East Texas Stroke Outcomes

National Comparison 2023/2024
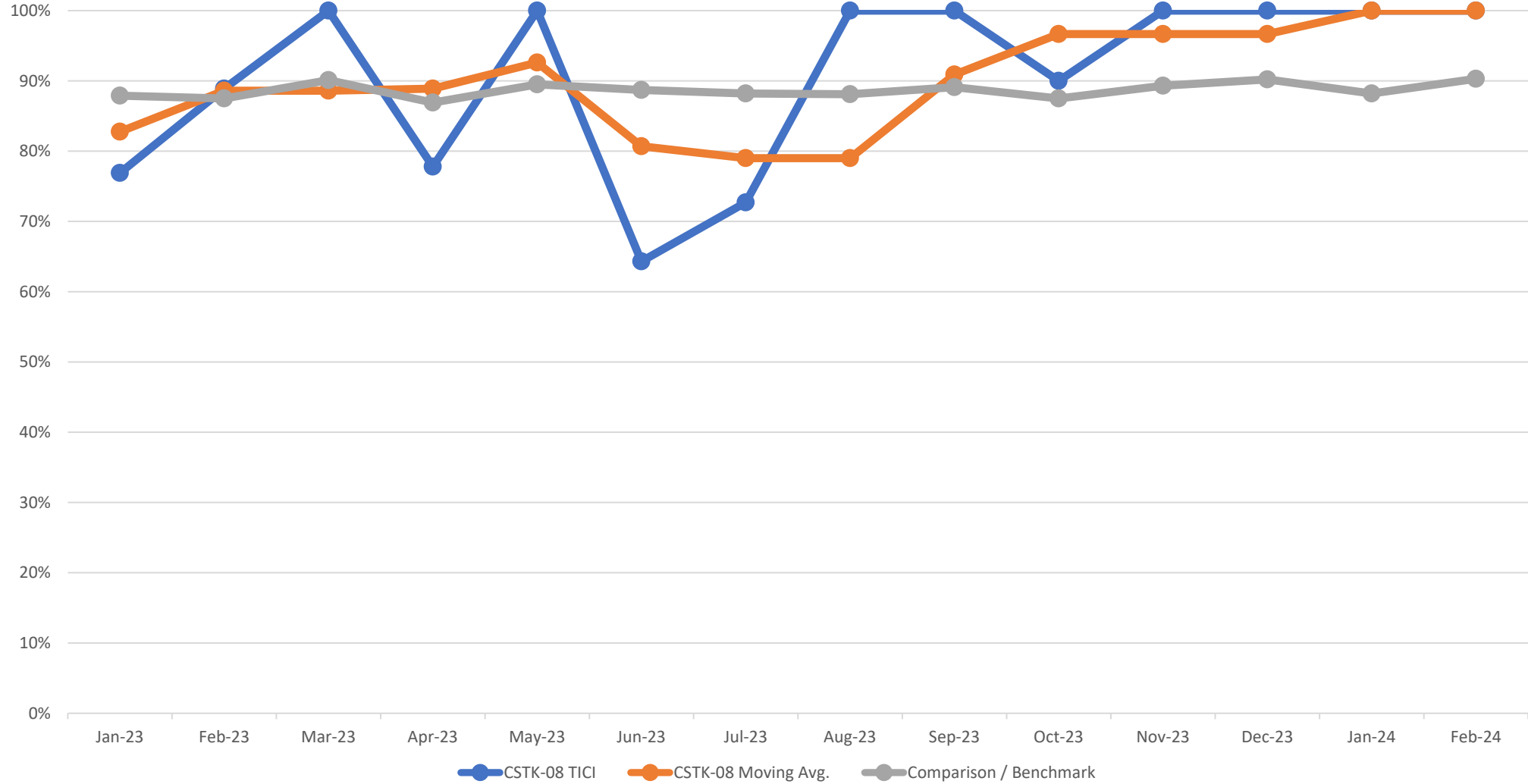
CSTK-09
Arrival Time to Skin Puncture (Median Time in Minutes)

- **Measure Description**: Median time from hospital arrival to the time of skin puncture to access the artery (e.g., brachial, carotid, femoral, radial) selected for endovascular treatment (EVT) of acute ischemic stroke.
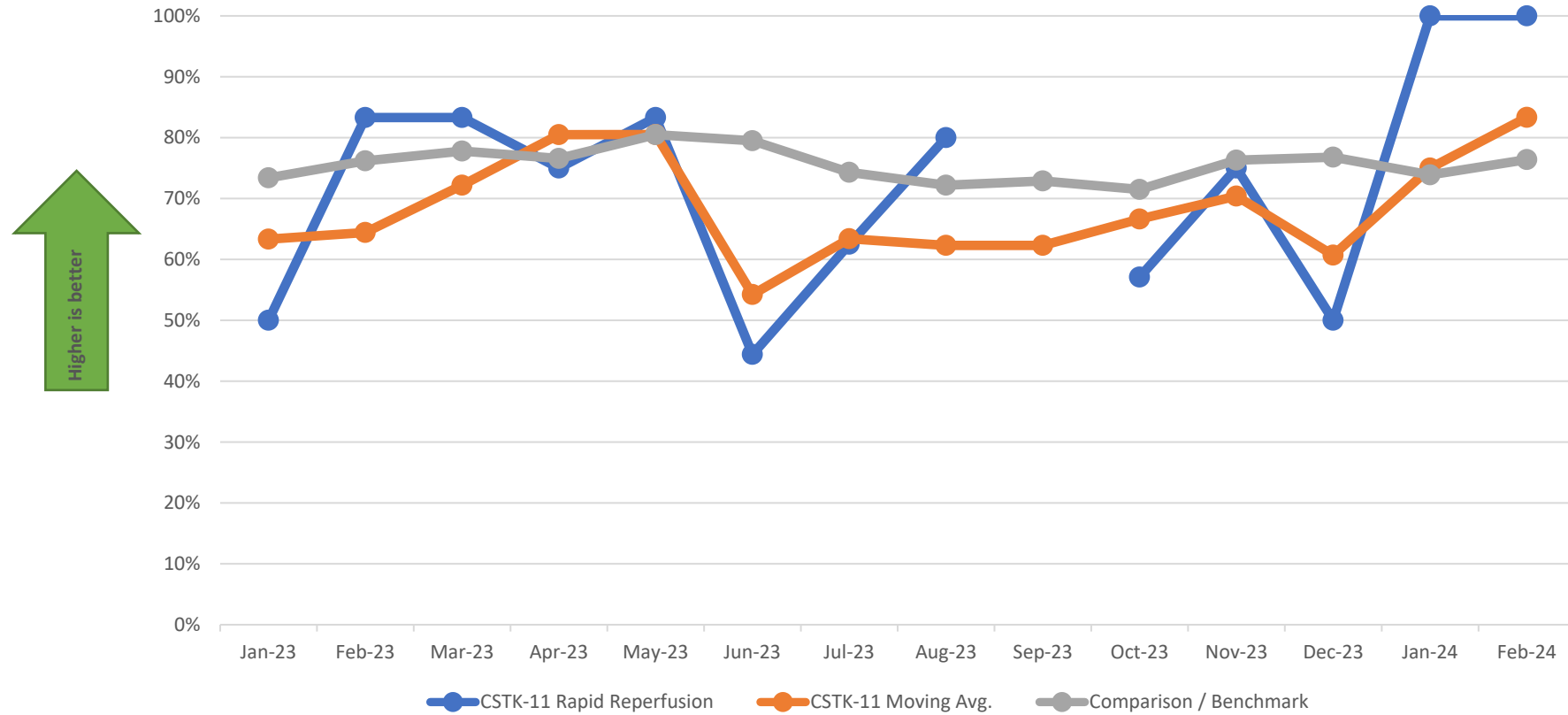
CSTK-08
Thrombolysis in Cerebral Infarction (TICI) Post Treatment Reperfusion Grade

Higher is better

Legend: CSTK-08 TICI — CSTK-08 Moving Avg. — Comparison / Benchmark

Measure Description: Ischemic stroke patients with a post-treatment reperfusion grade of TICI 2B or higher in the vascular territory beyond the target arterial occlusion at the end of mechanical endovascular reperfusion therapy. The Thrombolysis in Cerebral Infarction (TICI) Reperfusion Grade is used to measure cerebral reperfusion.
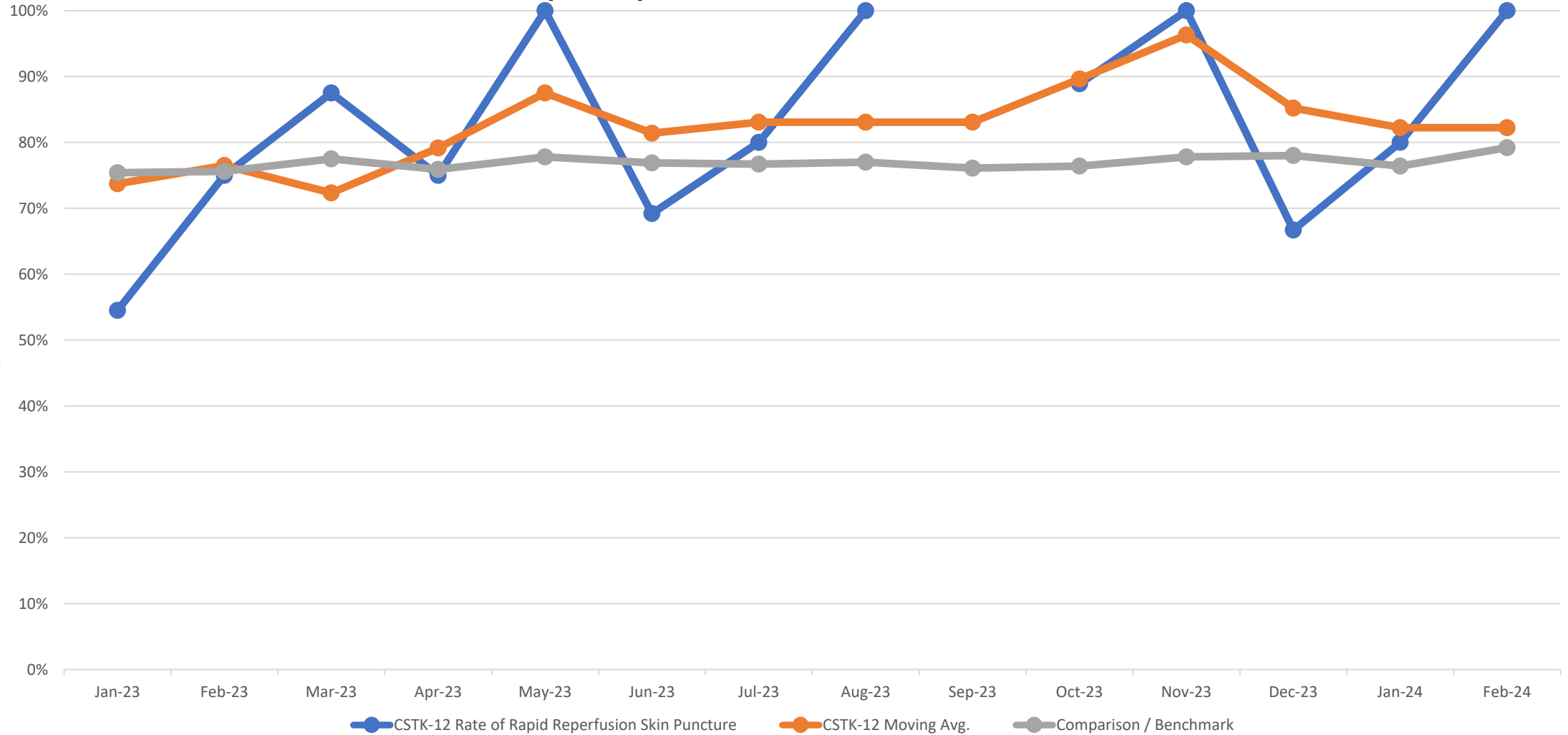
CSTK-11
Rate of Rapid Effective Reperfusion From Hospital Arrival

Higher is better

— CSTK-11 Rapid Reperfusion   — CSTK-11 Moving Avg.   — Comparison / Benchmark

Measure Description: Ischemic stroke patients with a large vessel cerebral occlusion who receive mechanical endovascular reperfusion (MER) therapy within **120** minutes of hospital arrival and achieve TICI 2B or higher at the end of treatment.
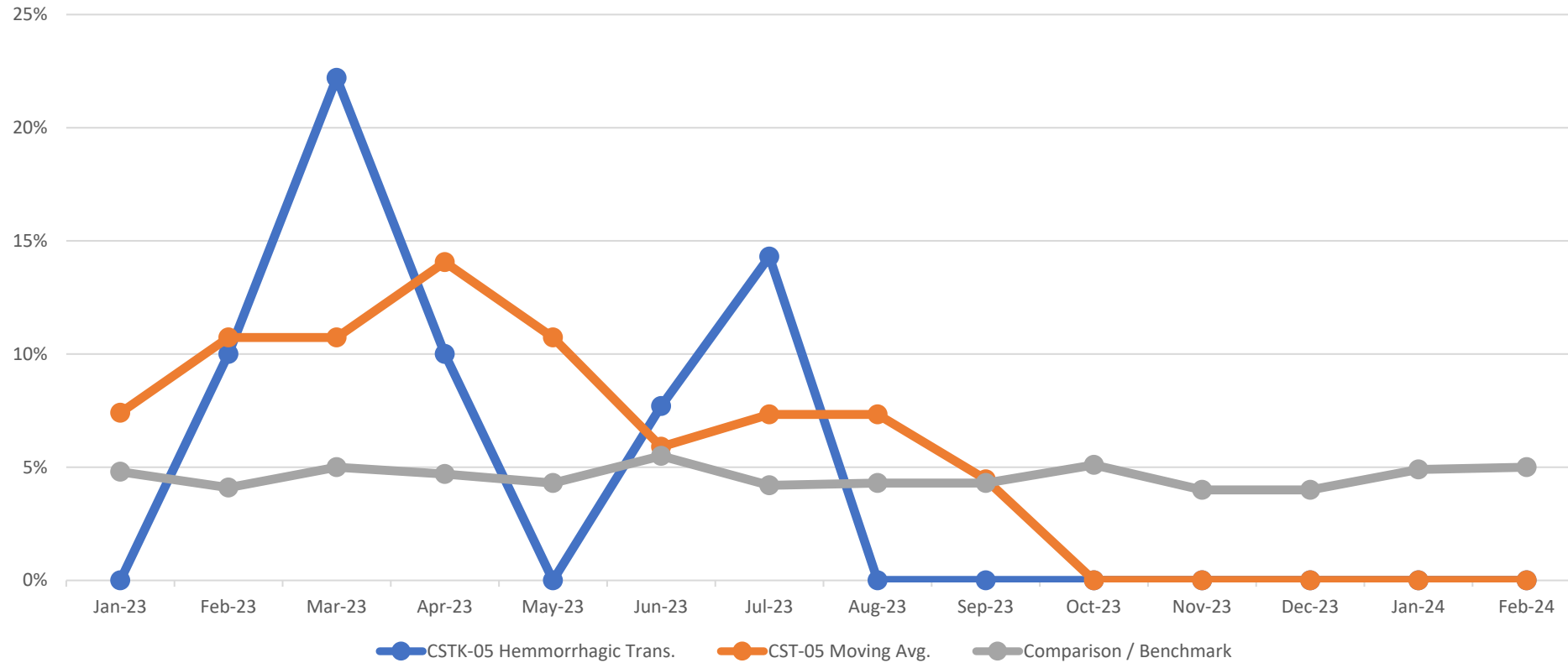
CSTK-12
Rate of Rapid Reperfusion from Skin Puncture

Higher is better

Legend: CSTK-12 Rate of Rapid Reperfusion Skin Puncture — CSTK-12 Moving Avg. — Comparison / Benchmark

Measure Description: Ischemic stroke patients with a large vessel cerebral occlusion who receive mechanical endovascular reperfusion (MER) therapy and achieve TICI 2B or higher less than (<) or equal to **60** minutes from the time of skin puncture.

CSTK-05
Hemorrhagic Transformation Overall Rate

Lower is Better

Legend: CSTK-05 Hemmorrhagic Trans. — CST-05 Moving Avg. — Comparison / Benchmark

Measure Description: Ischemic stroke patients who develop a symptomatic intracranial hemorrhage (i.e., clinical deterioration ≥ 4-point increase on NIHSS and brain image finding of parenchymal hematoma, or subarachnoid hemorrhage, or intraventricular hemorrhage) within (≤) 36 hours after the onset of treatment with intra-venous (IV) alteplase therapy only

Carotid Endarterectomy Mortality Rate