Acute stroke clinical care standard indicators: 2b-Proportion of patients with a final diagnosis of ischaemic stroke who received endovascular thrombectomy, 2019-



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Identifying and definitional attributes

Metadata item type: Indicator Indicator type: Indicator

Short name: Indicator 2b- Proportion of patients with a final diagnosis of ischaemic stroke who

received endovascular thrombectomy

METEOR identifier: 719088

Registration status: Australian Commission on Safety and Quality in Health Care, Qualified 09/09/2019

Description: Proportion of patients with a final diagnosis of <u>ischaemic stroke</u> who received

endovascular thrombectomy.

Indicator set: Clinical care standard indicators: acute stroke

Australian Commission on Safety and Quality in Health Care, Standard

03/11/2020

Collection and usage attributes

Computation description: Presented as a percentage.

Computation: (Numerator ÷ denominator) x 100

Numerator: Number of patients with a final diagnosis of ischaemic stroke who

received endovascular thrombectomy.

Denominator: Number of patients with a final diagnosis of ischaemic stroke.

Comments: Eligibility for endovascular thrombectomy is defined as ischaemic stroke caused by

a large vessel occlusion in the internal carotid artery, proximal cerebral artery (M1 segment), or with tandem occlusion of both the cervical carotid and intracranial arteries. Endovascular thrombectomy should be undertaken when the procedure can be commenced within six hours of stroke onset. (Goyal et al. 2016) or between 6-24 hours after they were last known to be well if clinical and CT perfusion or MRI features indicate the presence of salvageable brain tissue (Nogueira et al. 2017,

Albers et al. 2018).

This indicator only applies to hospitals able to provide endovascular thrombectomy.

Representational attributes

Representation class: Percentage

Data type: Real

Unit of measure: Service event

Format: N[NN]

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: