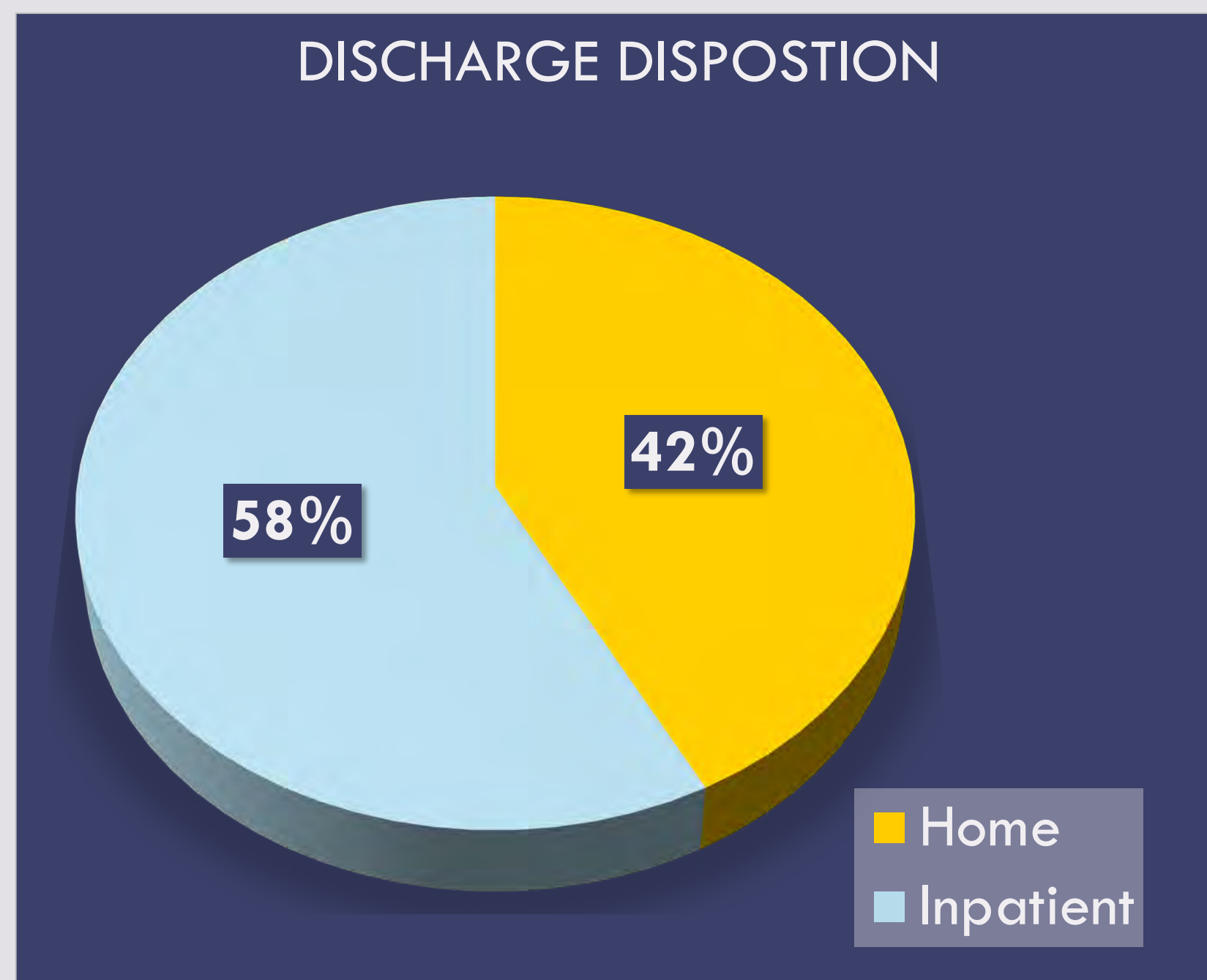
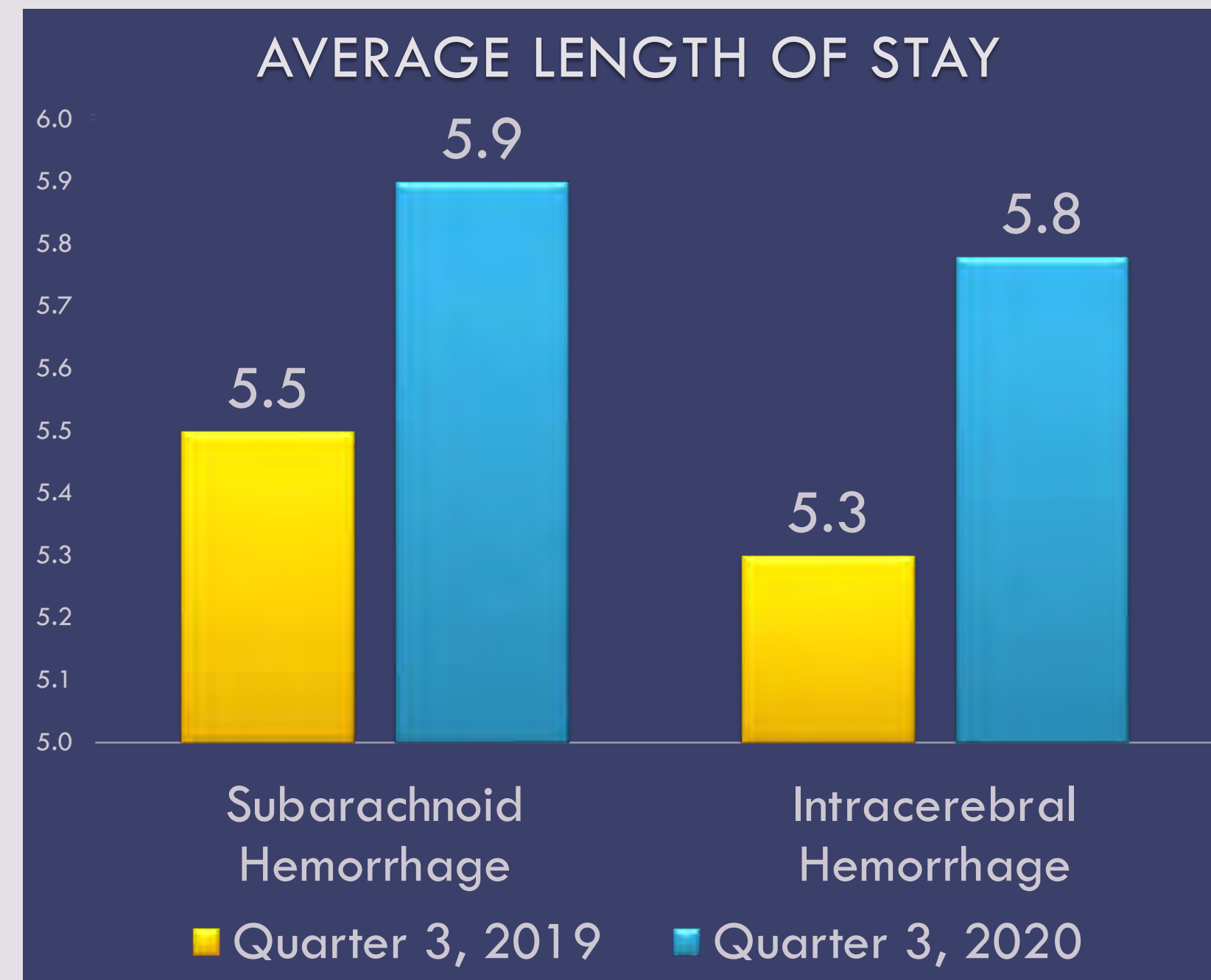


# HEMORRHAGIC STROKES

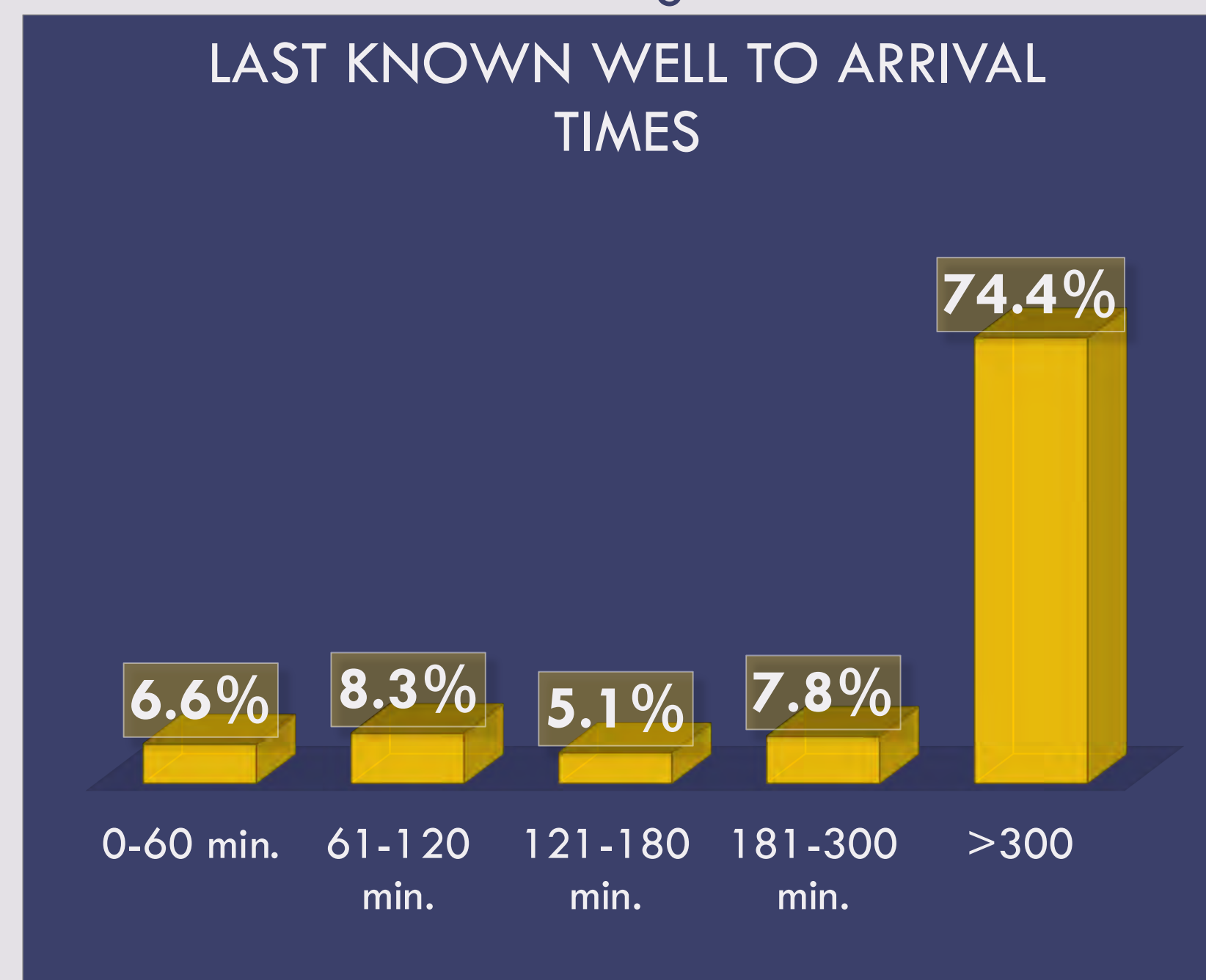
Quarter 3, 2020



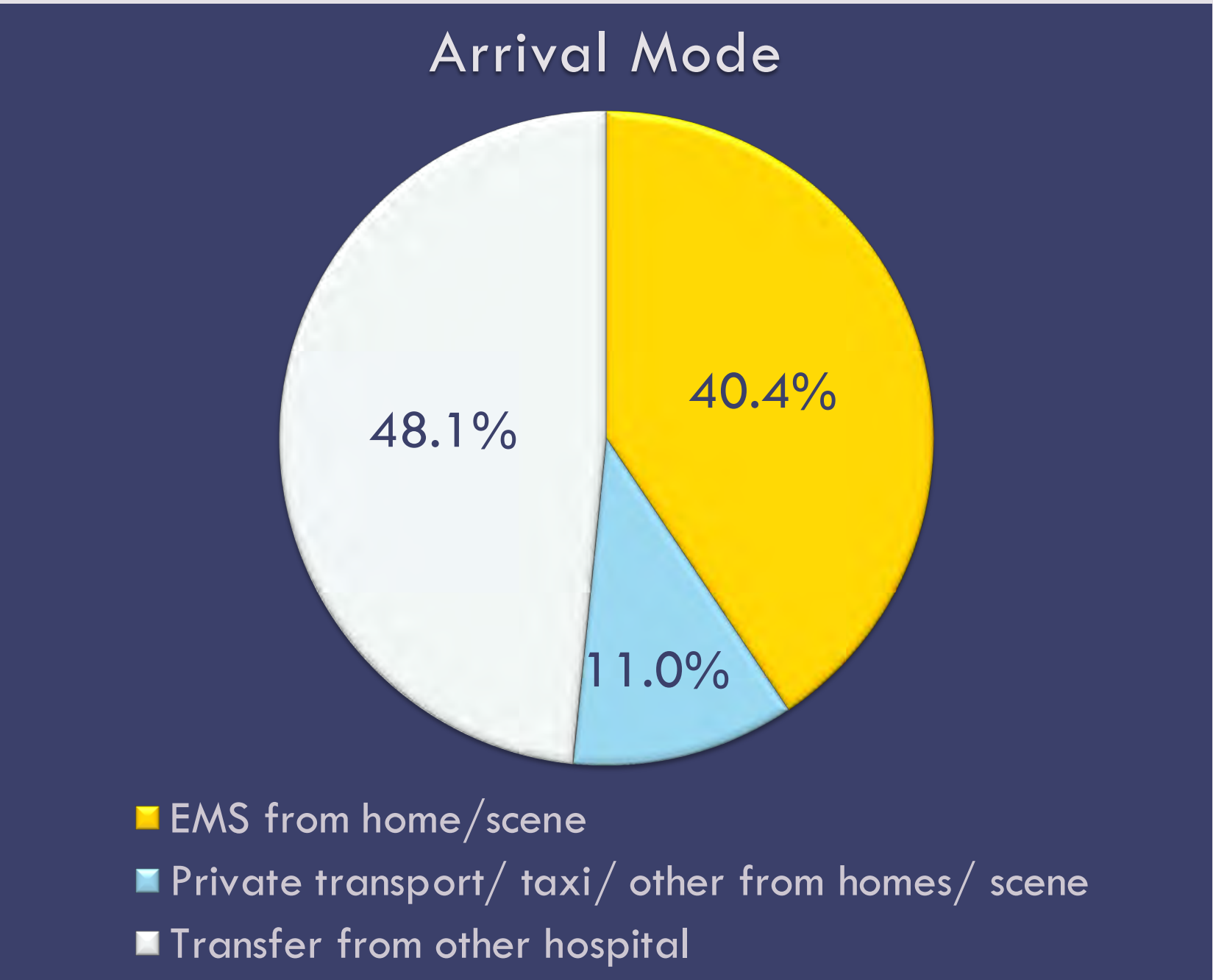
Patients grouped by how they left the hospital



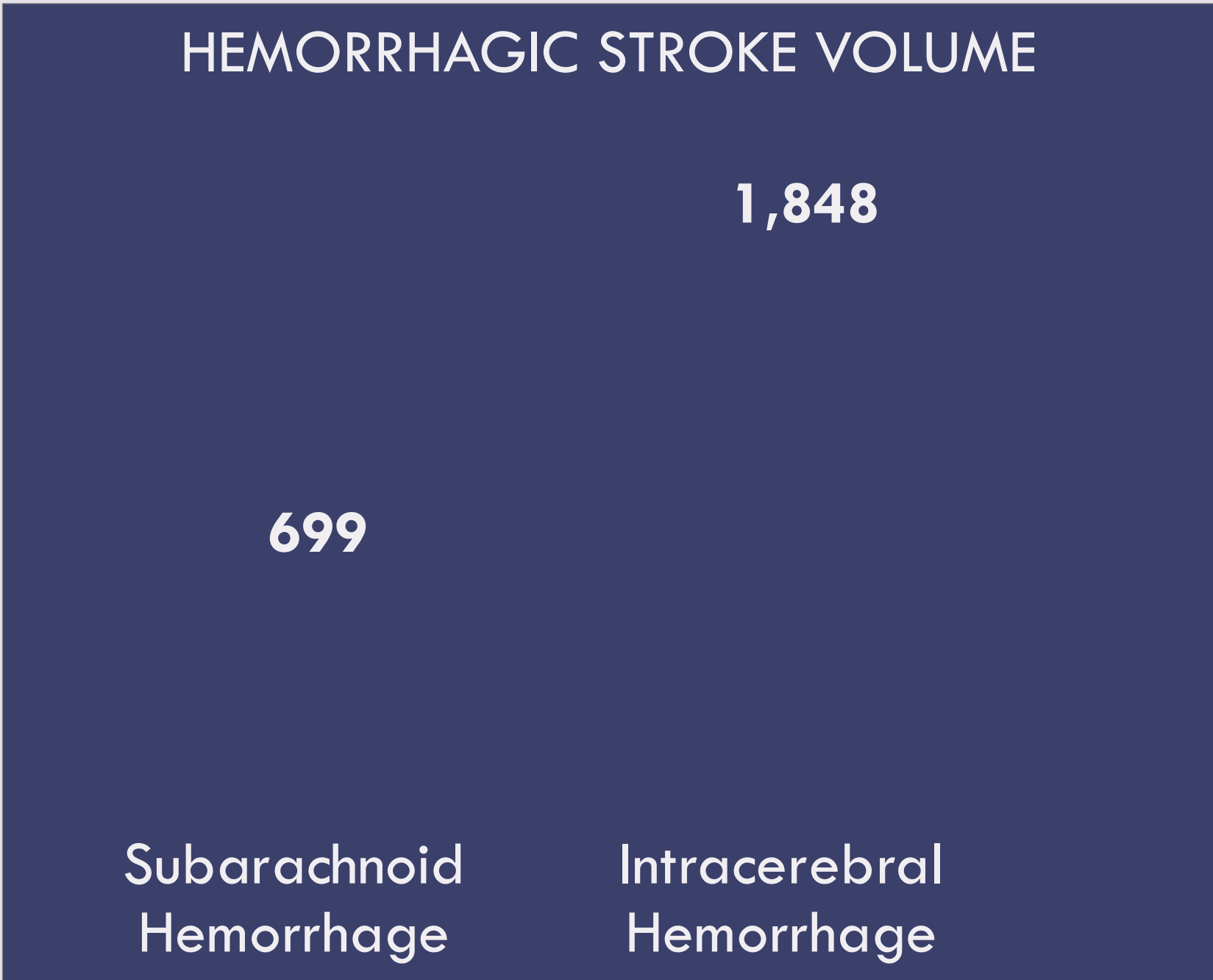
Length of stay, grouped by Hemorrhagic Strokes



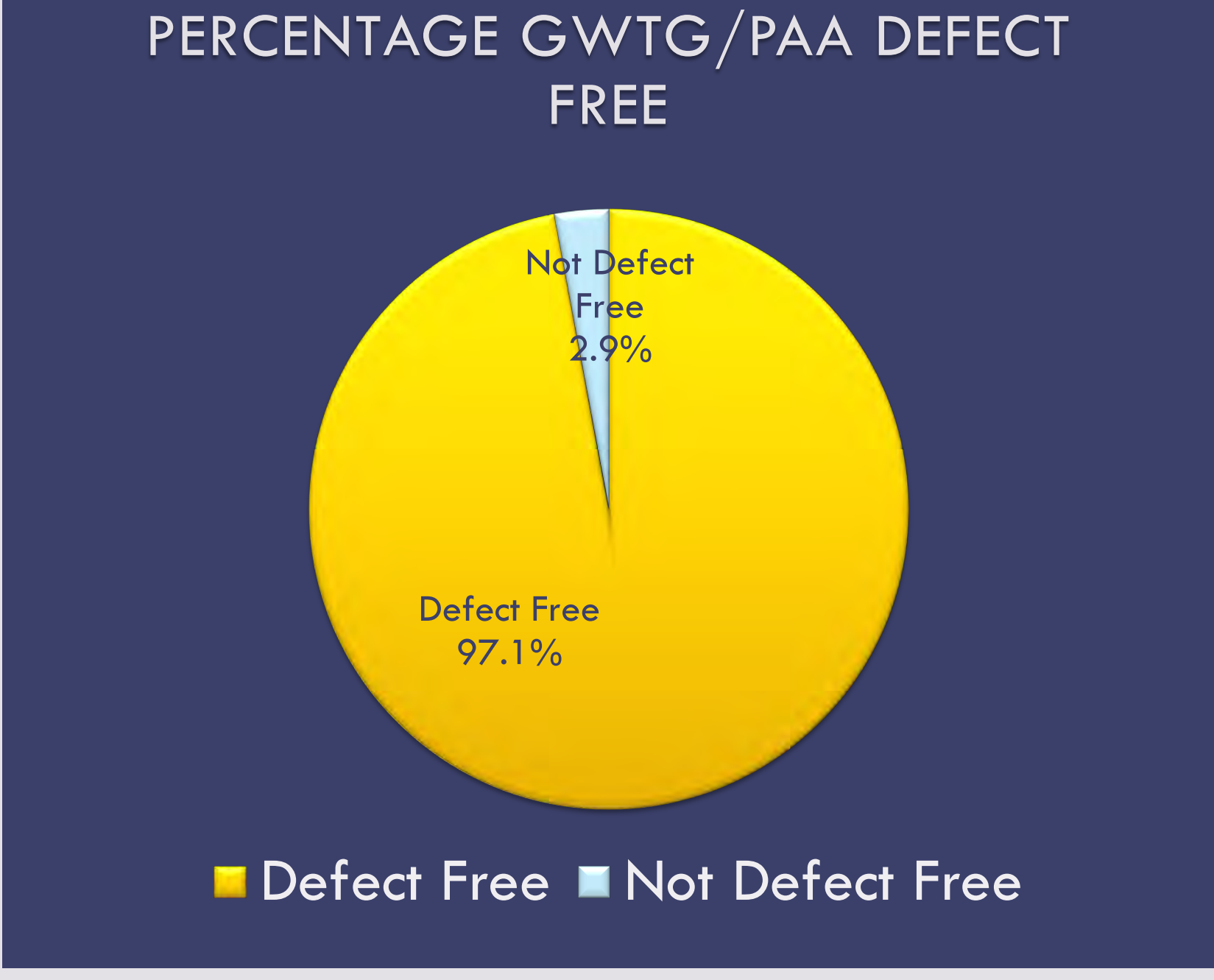
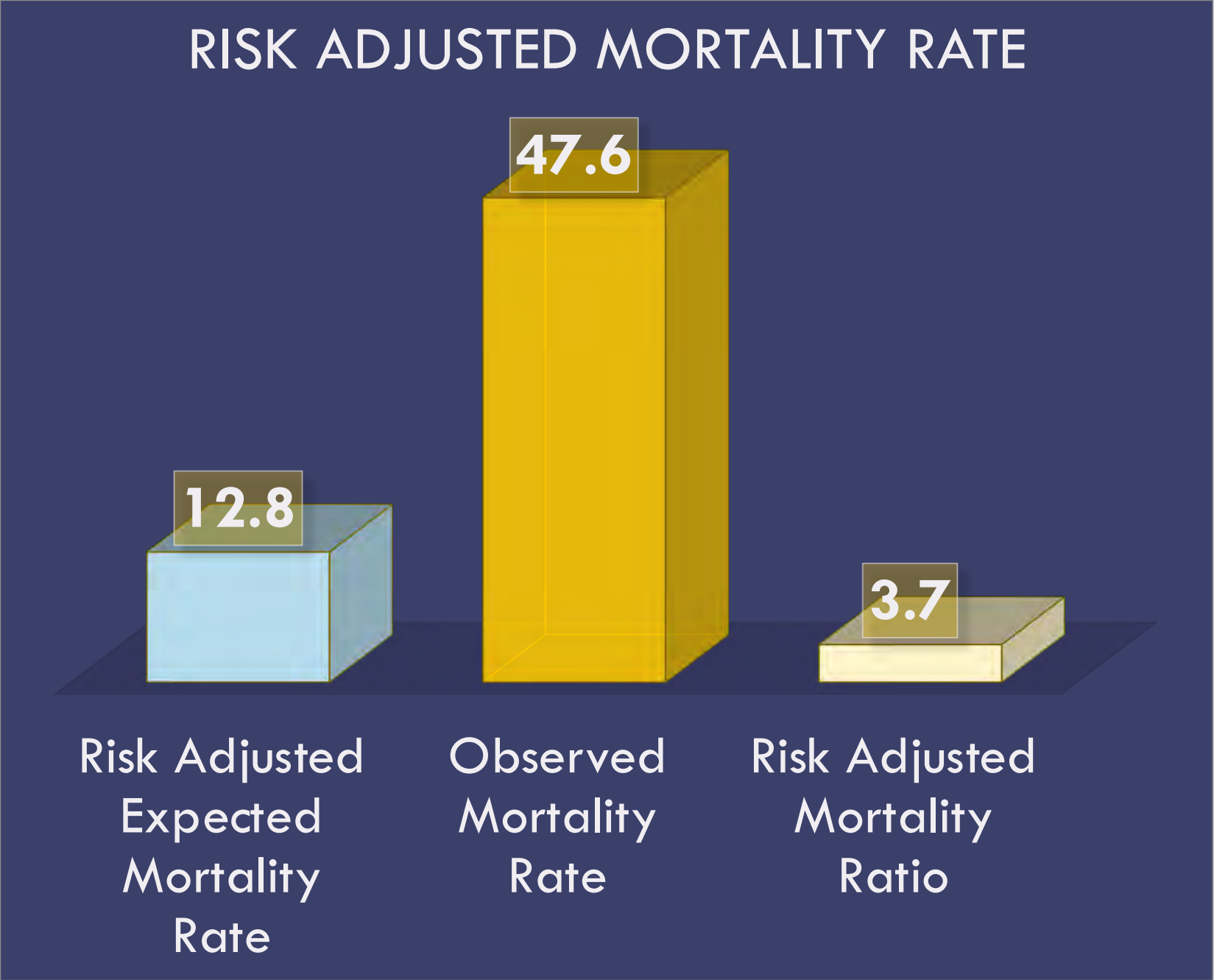
Time from last known well to ED arrival at a hospital



Patients grouped by arrival mode



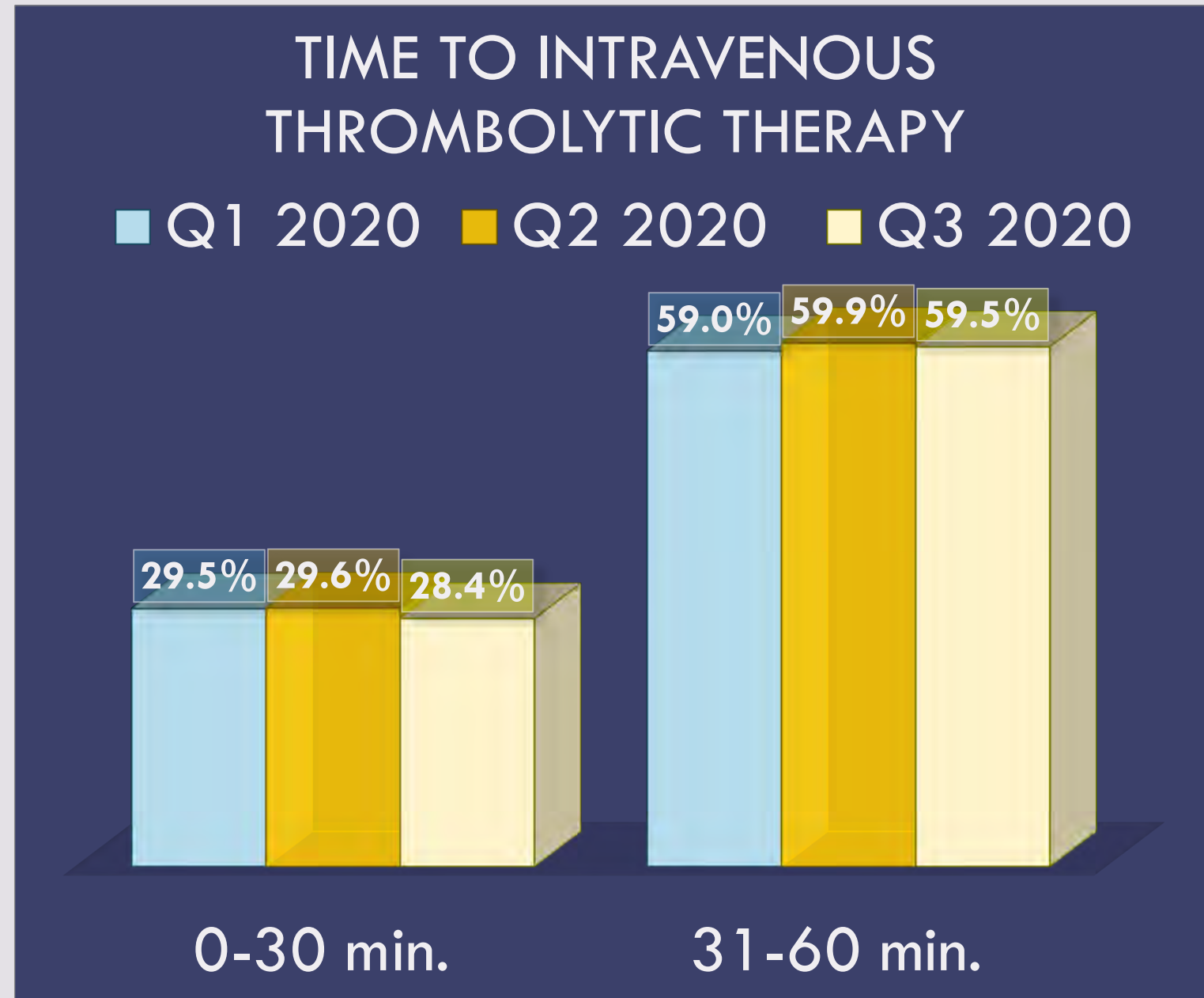
Patients grouped together by stroke type



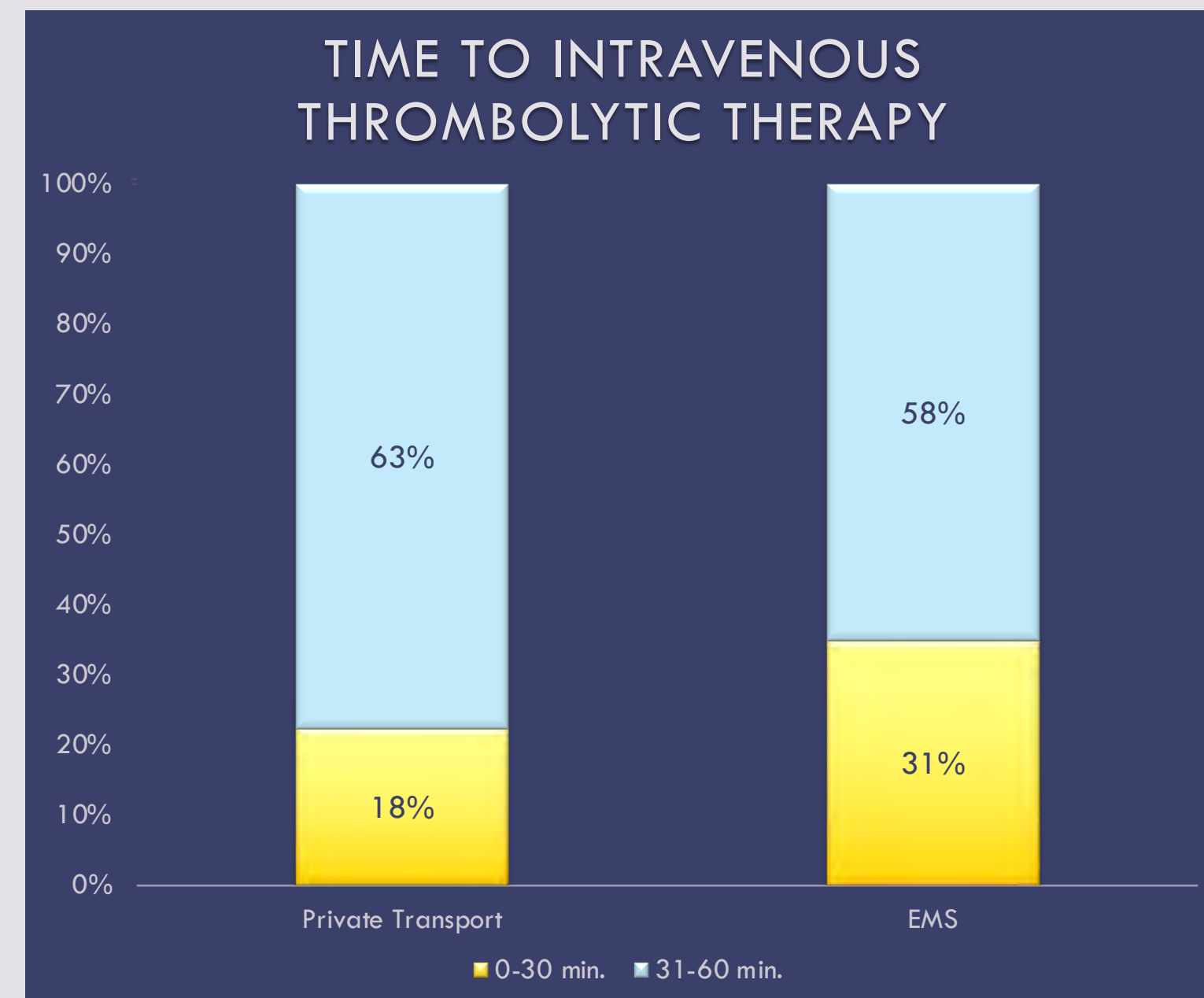
Defect-free measure of the 7 consensus GWTG/PAA measures

# ISCHEMIC STROKES

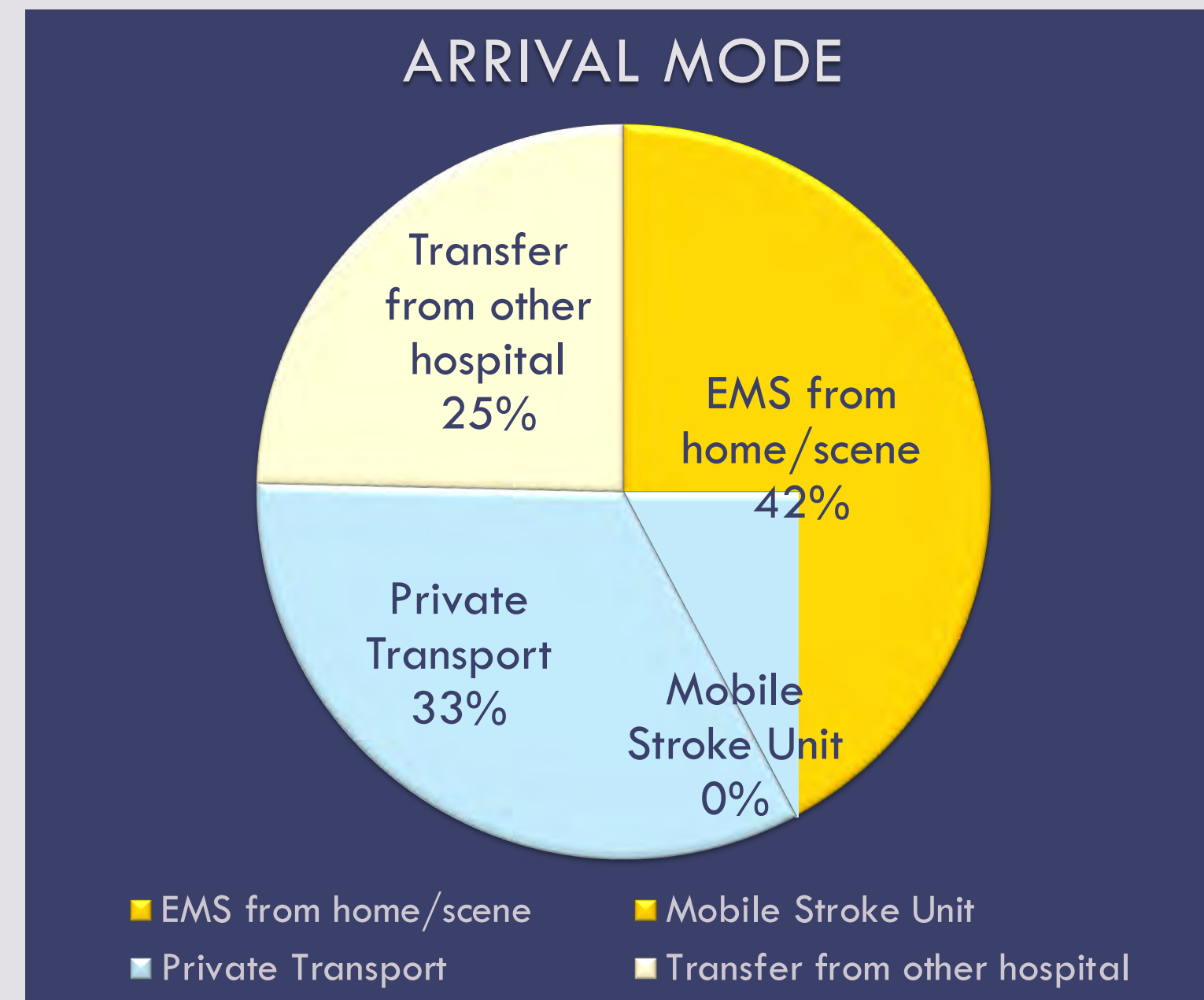
Quarter 3, 2020



Time from hospital arrival to initiation of thrombolytic therapy administration

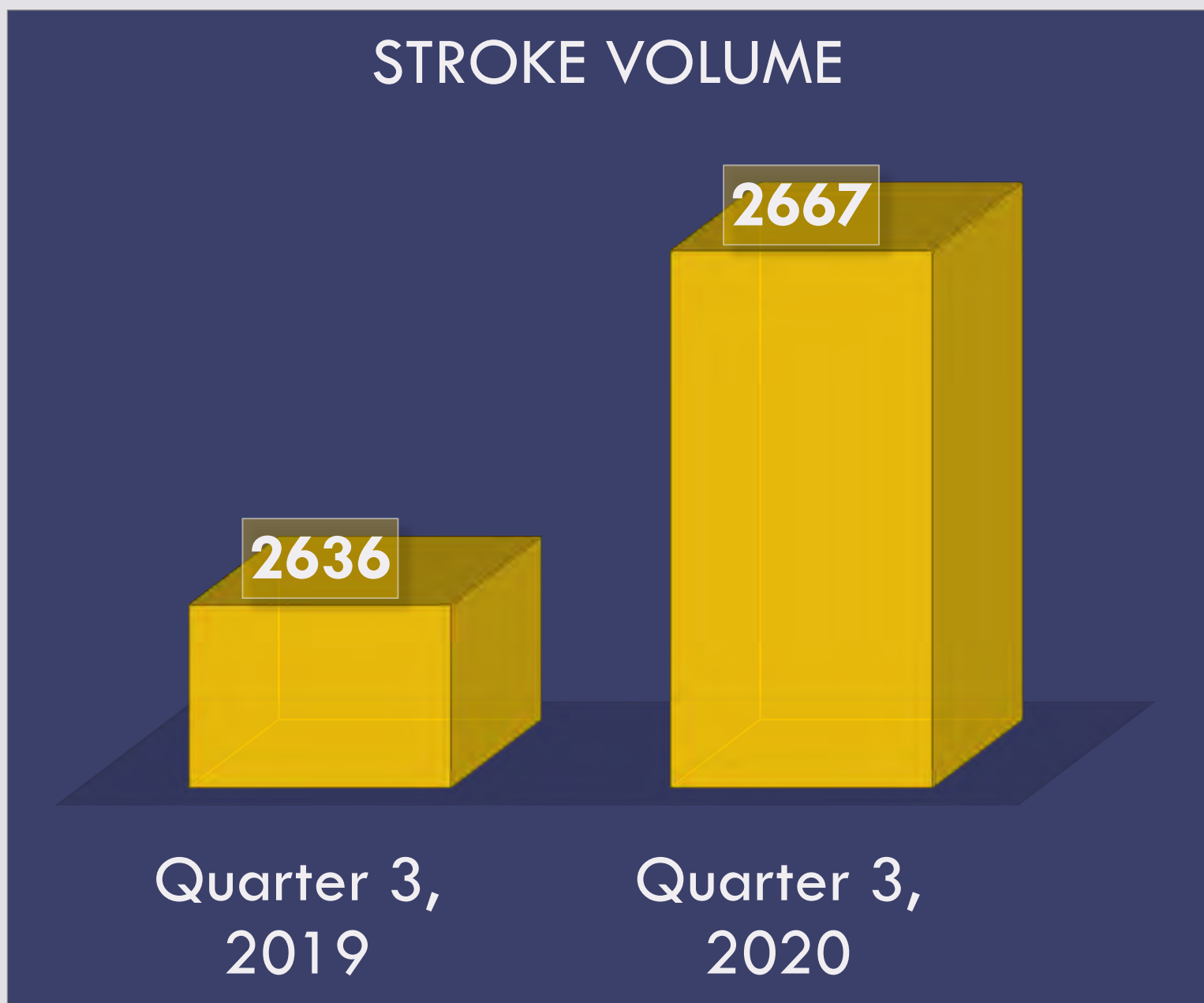


Comparing transportation method with thrombolytic therapy administration



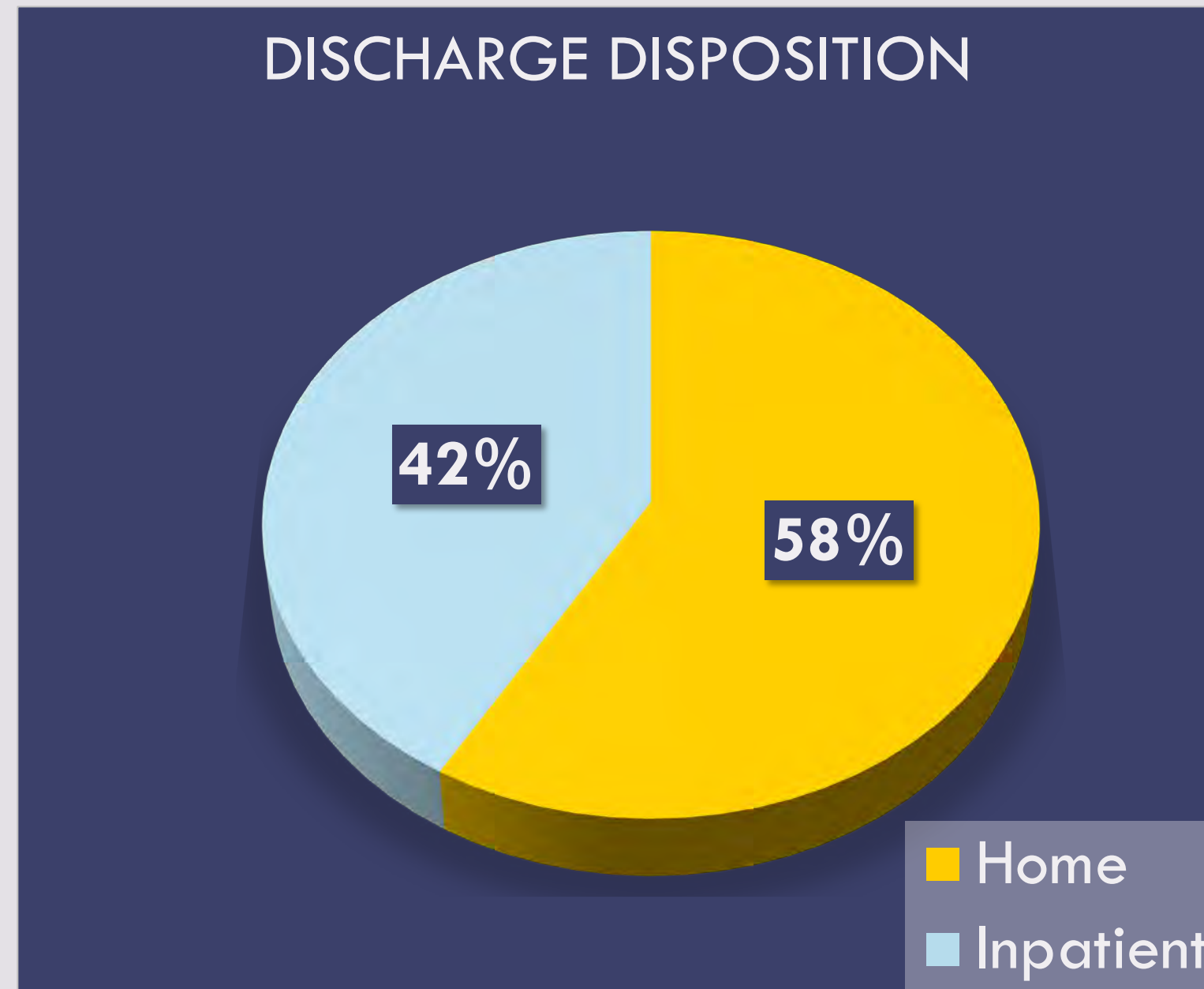
Patients grouped by how they arrived at the hospital

### STROKE VOLUME



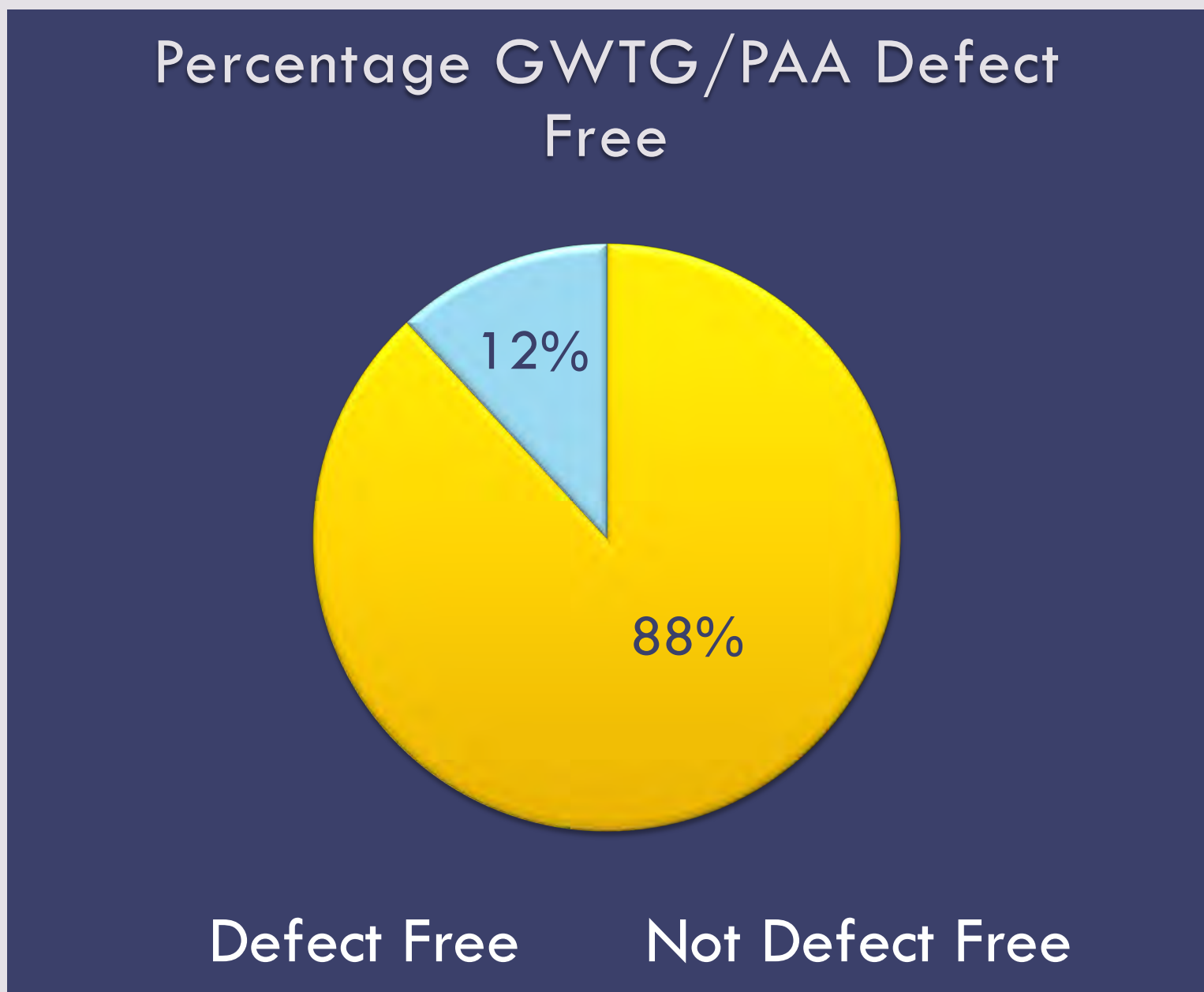
Total number of ischemic strokes

### DISCHARGE DISPOSITION



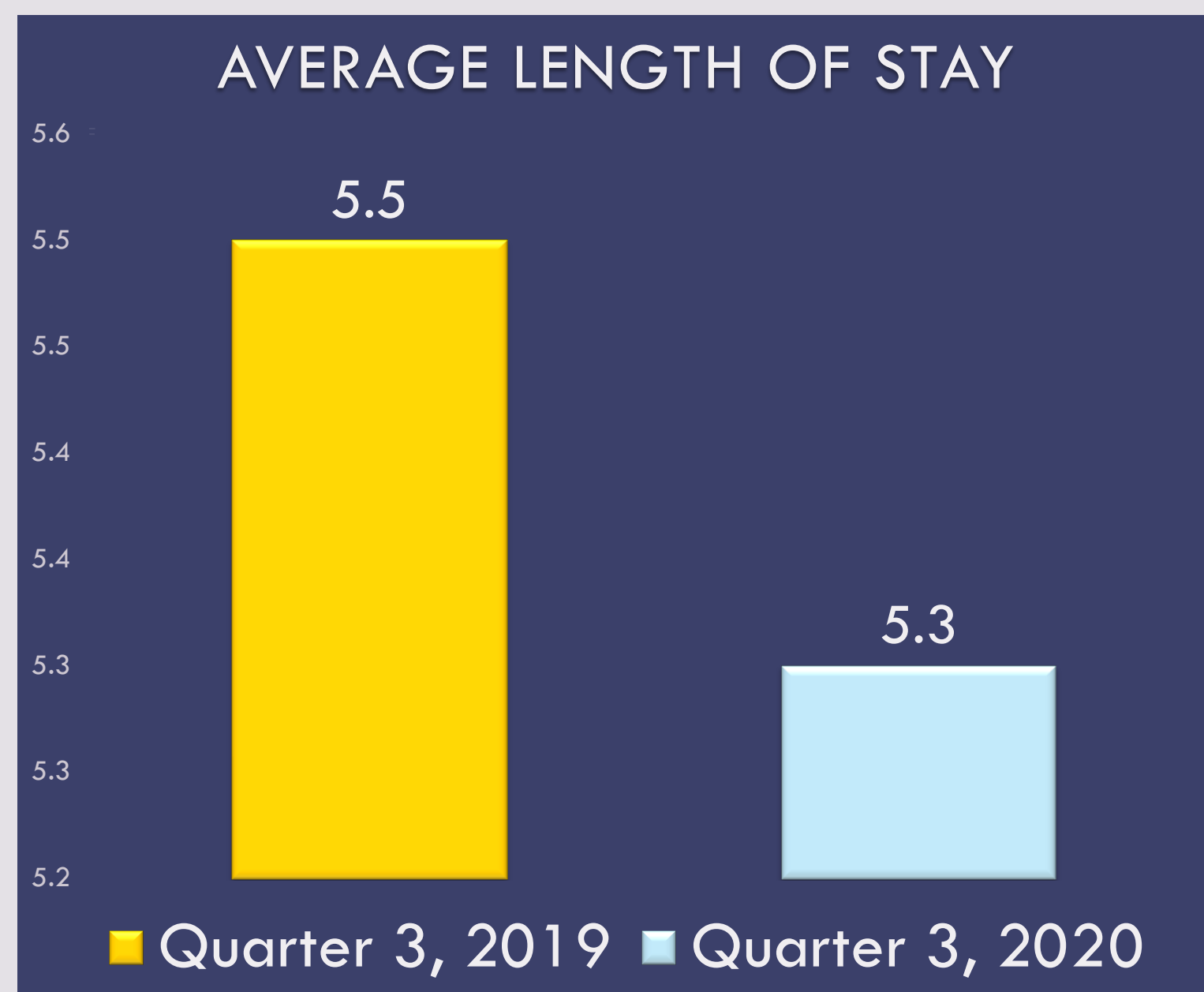
Patients grouped by how they left the hospital

### Percentage GWTG/PAA Defect Free

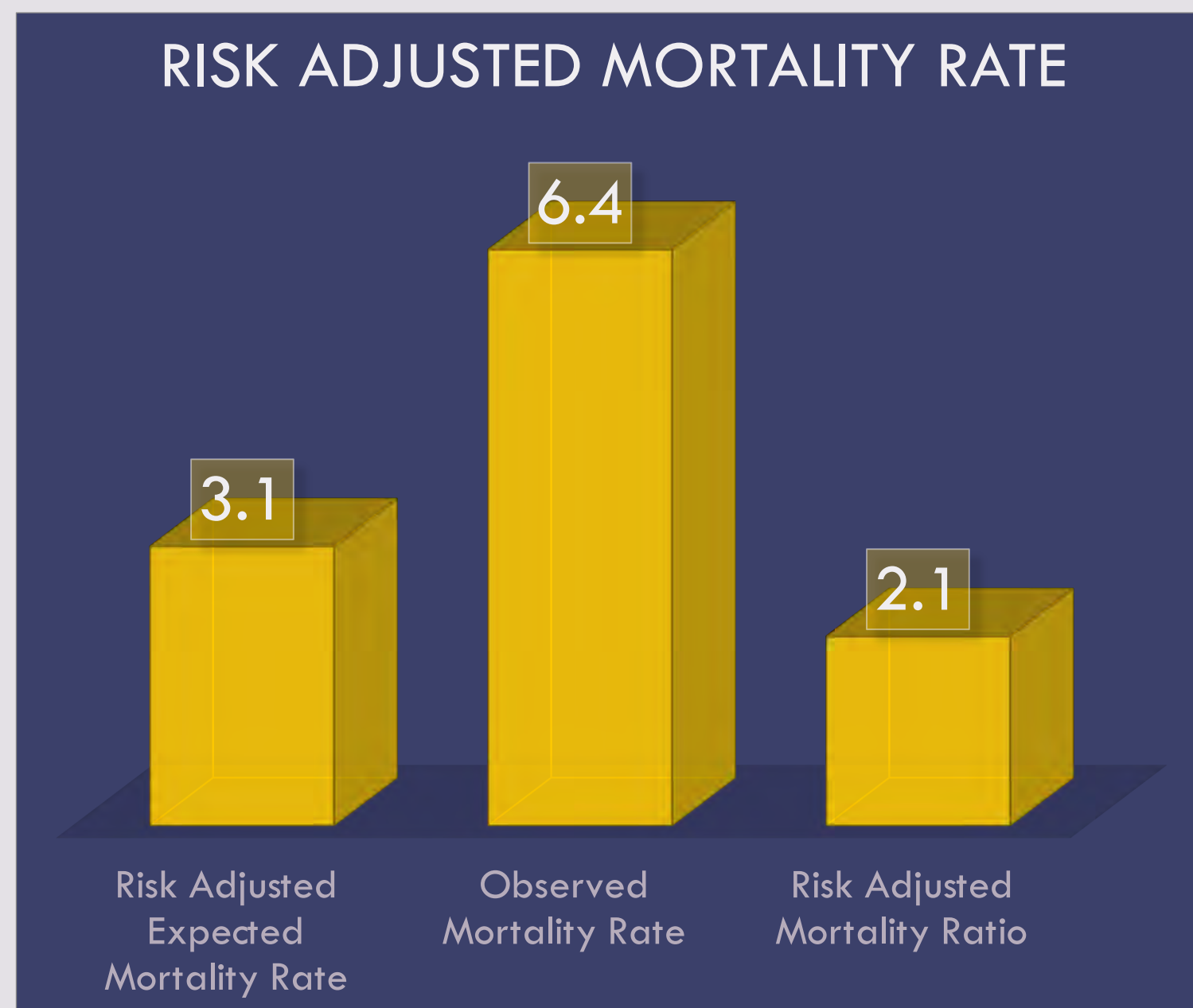


Defect-free measure of the 7 consensus GWTG/PAA measures

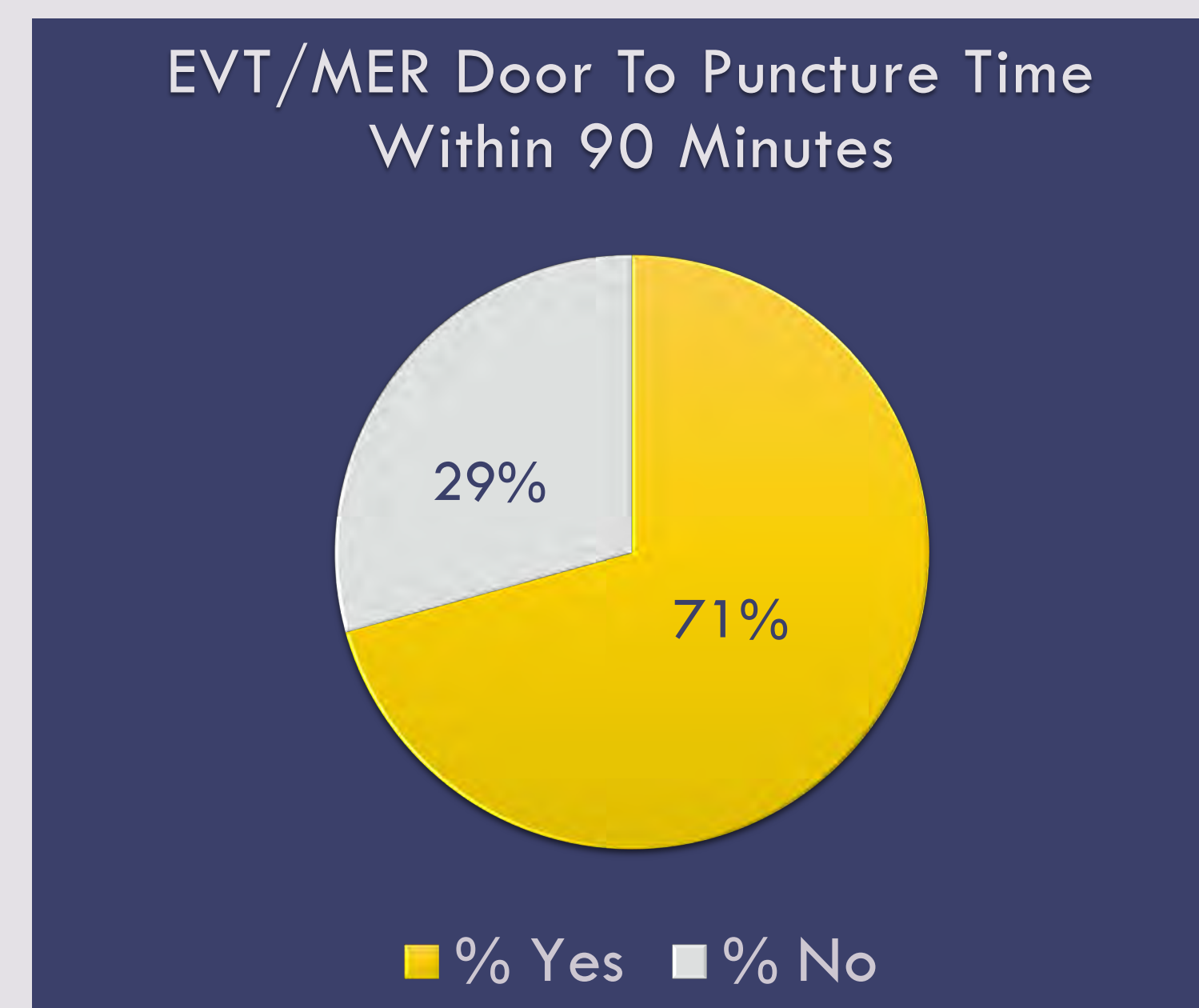
### AVERAGE LENGTH OF STAY



Length of stay



The risk adjusted mortality rate is a mortality rate that is adjusted for predicted risk of death.



Percentage of patients with acute ischemic stroke who receive mechanical endovascular reperfusion therapy and for whom arterial puncture time is  $\leq$  90 minutes after hospital arrival.