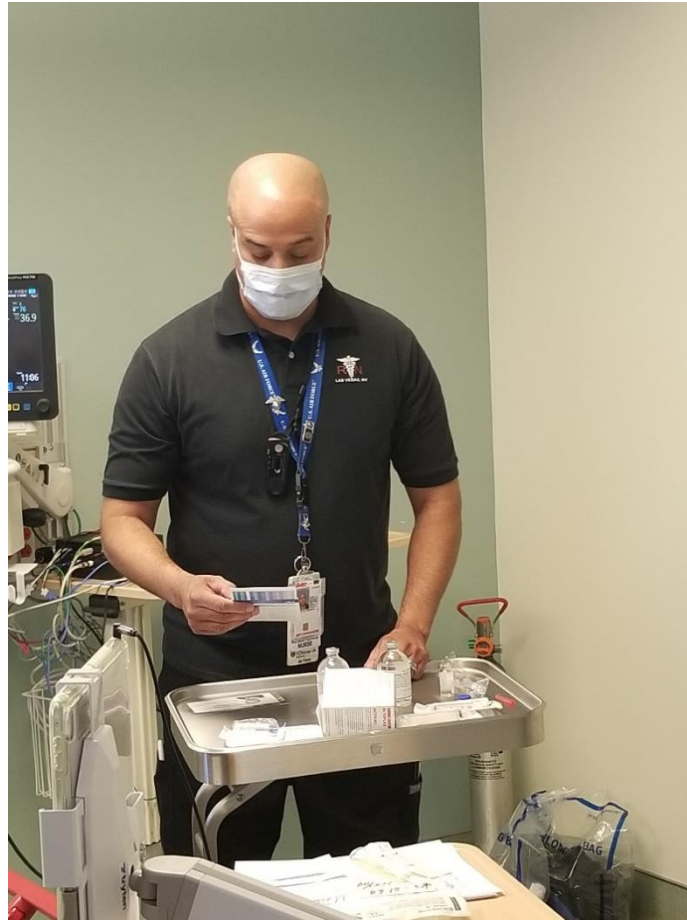


## Telestroke Sustainment Training Strengthens Stroke Care Process for Veterans

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*(Ken Curtis, RN, prepares to reconstitute Alteplase. Photography by Christopher Woods)*

The VA Southern Nevada Healthcare System (VASNHS) was one of the first facilities to align with the VA National Telestroke Program (NTSP) in 2018. Alignment with the NTSP allowed our facility access to specialized neurologic care 24 hours per day and 7 days per week at the touch of a button.

Our facility had the opportunity to work with the staff of the NTSP in early February (2022) to provide sustainment training to our staff. Cyra Torres Diaz and Sunny Streer, national telestroke nurse coordinators, and David Adriansen, director of simulation for the NTSP worked closely with our leadership staff to strengthen our stroke care processes.

One of the activities in the NTSP sustainment training gave us the ability to flow map how each patient is treated once they are in the emergency department, or when there is a change in a patient's condition on a nursing floor. The flow maps have given us a chance to better standardize the process and better align with the standards of the NTSP.

The sustainment training concluded with two telestroke mock code strokes to help staff practice the care of a patient experiencing stroke-like symptoms in the Emergency Department and Intensive Care Unit. A key difference between these mock codes and previous events was the addition of a two-camera system to capture and record the event using the TEAMS application. One camera was stationed at the patient's bedside, and the other followed the patient as they moved through the facility. Not only did this provide a recording of the event for later analysis, but it allowed participants to view the simulation remotely. This reduced the number of in-person staff to participants and decreased the chance of distractions. The staff at VASNHS plan to expand this camera technique to other simulations in the future. [CLICK HERE](#) to learn more about the NTSP.

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