

Standardized Performance Measures for Thrombectomy-Capable Stroke Centers

Joint Commission Quality Measures for Disease-Specific Care Certification

Measure ID#	Measure Short Name	Measure Description
CSTK-01	National Institutes of Health Stroke Scale (NIHSS) Score Performed for Ischemic Stroke Patients	This measure captures the proportion of ischemic stroke patients for whom an initial NIHSS score is performed prior to any acute recanalization therapy (i.e., IV alteplase therapy, or IA alteplase therapy, or mechanical endovascular reperfusion therapy) in patients undergoing recanalization therapy and documented in the medical record, OR documented within 12 hours of arrival at the hospital emergency department for patients who do not undergo recanalization therapy.
CSTK-02	Modified Rankin Score (mRS) at 90 days (process measure)	This measure captures the proportion of ischemic stroke patients treated with intra-venous (IV) or intra-arterial (IA) alteplase therapy or who undergo mechanical endovascular reperfusion therapy for whom a 90 day (≥75 days and ≤105 days) mRS is obtained via telephone or in-person.
CSTK-05	Hemorrhagic Transformation (Overall Rate) • IV t-PA Only • IA t-PA or MER	This measure captures the proportion of 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 (\leq) 36 hours after the onset of treatment with intra-venous (IV) or intra-arterial (IA) alteplase therapy, or mechanical endovascular reperfusion procedure (i.e., mechanical endovascular thrombectomy with a clot retrieval device) (stratified by type of therapy).
CSTK-08	Thrombolysis in Cerebral Infarction (TICI) Post-Treatment Reperfusion Grade	This measure captures the proportion of 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.
CSTK-09	Arrival Time to Skin Puncture	This measure reports the median time (in minutes) 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.



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STK-1	Venous Thromboembolism (VTE) Prophylaxis	This measure captures the proportion of ischemic or hemorrhagic stroke patients who received VTE prophylaxis or have documentation why no VTE prophylaxis was given the day of or the day after hospital admission.
STK-2	Discharged on Antithrombotic Therapy	This measure captures the proportion of ischemic stroke patients prescribed antithrombotic therapy at hospital discharge.
STK-3	Anticoagulation Therapy for Atrial Fibrillation/Flutter	This measure captures the proportion of ischemic stroke patients with atrial fibrillation/flutter who are prescribed anticoagulation therapy at hospital discharge.
STK-4	Thrombolytic Therapy	This measure captures the proportion of acute ischemic stroke patients who arrive at this hospital within 2 hours of time last known well and for whom IV alteplase was initiated at this hospital within 3 hours of time last known well.
STK-5	Antithrombotic Therapy By End of Hospital Day 2	This measure captures the proportion of ischemic stroke patients who had antithrombotic therapy administered by end of hospital day 2.
STK-6	Discharged on Statin Medication	This measure captures the proportion of ischemic stroke patients who are prescribed statin medication at hospital discharge.
STK-8	Stroke Education	This measure captures the proportion of ischemic or hemorrhagic stroke patients or their caregivers who were given educational materials during the hospital stay addressing all of the following: activation of emergency medical system, need for follow-up after discharge, medications prescribed at discharge, risk factors for stroke, and warning signs and symptoms of stroke.
STK-10	Assessed for Rehabilitation	This measure captures the proportion of ischemic or hemorrhagic stroke patients who were assessed for rehabilitation services.