

2013 ANNUAL REPORT





Arkansas (AR) SAVES continues to be one of several successful programs of the UAMS Center for Distance Health. Patients are receiving lifesaving stroke care that was not available prior to the program. Providing both rural and urban sites virtual access to vascular neurologists at lifesaving speed continues to be the mission for broader access to health care for all Arkansans. AR SAVES recognizes the value of educating Arkansans on the signs of stroke and how to seek help immediately, regardless of geographic location.

To make this program even stronger, Arkansas e-Link is finishing the deployment of the \$102 million expansion of two existing networks: Arkansas Telehealth Network (ATN) managed by the Arkansas Telehealth Oversight and Management group (ATOM) and the Arkansas Research and Education Optical Network (ARE-ON). This grant-funded project has increased broadband capacities and interactive video equipment at 470+ health care, higher education, public safety, and research entities in Arkansas.

AR SAVES continues to be one of the strongest telehealth programs not only in Arkansas, but in the country. This is truly a statewide partnership that has now made us a leader in stroke care for Arkansans. The continued growth will only be successful by keeping all of us focused on one thing; the best outcome for the patient.

Sincerely,

Curtis Lowery, M.D.



Tina Benton, RN



April Cowart, MA



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A man with a goatee and a blue polo shirt is sitting outdoors under a large tree, smiling. He is wearing a watch and a pink wristband. The background is a blurred outdoor setting with trees and a lawn.

Reality Exceeds Expectations

By Lauren Farabough



When Leslie Bennett, of Joiner, started having stroke symptoms one Wednesday night, he wasn't sure what to expect his future to look like. But reality turned out far better than any scenario he could have imagined. By Friday, he was back in his community cheering on his daughter at her softball game, and on Monday he returned to work.

Bennett, 42, worked all day April 3. Later that night, he started feeling strange, and his teenage daughter noticed that one side of his mouth was drooping. His arm and leg were both numb. He had experienced a small stroke just earlier that week and was working with his primary care physician to get his blood pressure under control. This time was different, though. He decided after talking with his family that he should go on to the emergency room.

He was taken to the South Mississippi County Regional Medical Center in Osceola. Luckily for Bennett, the medical center is a member of the AR SAVES network. Emergency room physicians performed tests and administered the clot-bursting drug, Activase. Bennett was the first patient to receive Activase at the medical center and the first to use the AR SAVES network since the hospital joined the network in November.

"To be able to provide a service of this magnitude to the people of rural Arkansas is priceless," said Felicia Pierce, nurse manager in the emergency department at the medical center. "It not only takes care of our patients and the community, but also

our families. We are humbled to be a part of this and have this partnership with UAMS."

With a stroke, time can make all the difference. Pierce said that they have access to stroke neurologists at UAMS within 10 minutes. And within 35 minutes of his stroke diagnosis, Bennett was on his way to UAMS for further treatment.

"The process of transporting him to UAMS went smoothly, like we had been doing it for years," Pierce said. Every month staff members have training on what to do for patients having strokes, since it is a low-volume, but high-risk condition.

Bennett was unable to talk at first, but regained his speech by the time he got to UAMS. He couldn't get out of bed for almost a full day. However, the following day he was ready to return to his normal life.

"If it hadn't been for the treatment I received, I could have been in a nursing home or dead," Bennett said. "Everyone was really helpful. I never experienced anything like that, but they talked me through everything they were doing. I was scared, but they got me through it."

Bennett still experiences some trouble with his speech and sometimes has difficulty with control of his left hand, but those problems are very minor and nothing that interferes with his daily life. Bennett counts his blessings for the recovery he has had and credits AR SAVES with the outcome that he never could have expected.

AR SAVES Community Stroke Education: Preparing our Communities for Stroke

In 2012 Arkansas is the #1 state in the nation for per capita stroke deaths. Stroke is the #1 cause of long-term disabilities for Arkansans. It is a tragedy for stroke patients, but also for their families as stroke often ripples for generations in lost income, potential and opportunities for stroke caregivers.

Stroke will claim over 1,700 victims this year in Arkansas. Countless others will be attacked by stroke. The general public remains uninformed about stroke, and few stroke patients present to the hospital in time to receive treatment despite advances in stroke therapy.

The Arkansas Stroke Cause and Effect

Arkansas stroke death rate is 1.4 times the national average. (AHA 2010) AR SAVES education campaigns are increasing community awareness and will decrease time to hospital presentation among stroke patients. Community-based health promotion requires flexibility and willingness to listen.

What are AR SAVES Facilitators doing?

- Communicating to their hospitals and staffs that community stroke education is essential for an effective AR SAVES Telestroke Program.
- Dedicating time for stroke education planning and development.
- Utilizing events, programs and resources already established in their community and hospital.
- Encouraging and engaging others in the hospital and community to participate.
- Building on their hospitals past successes with community stroke education.
- Documenting their events and looking for ways to praise and give credit to their volunteers. Stroke education increases knowledge and changes behavior. Recognition of stroke and treating it as a medical emergency has saved the lives and the quality of life for hundreds of Arkansans. AR SAVES wants to prepare each person to be ready, willing and able to sound a warning and save one another when stroke attacks. We can all educate others so they can sound that alarm too. AR SAVES is committed to continue to prepare our communities for stroke.



Over 450 Events

More than 135,000
Arkansans educated
on stroke



AR SAVES Champion of the Year Makes Stroke Education her Mission

By Holland Doran

Volunteering with the AR SAVES program started as just a fourth-year pharmacy course requirement for Abby Staton, now a Stuttgart pharmacist.

But soon it became much more as she began to give the life-saving stroke program a voice in her Arkansas County community. Those efforts led to her being selected AR SAVES Champion of the Year.

“Sharing about the AR SAVES program began as a requirement,” said Staton, of Gillett. “But, it quickly turned into a mission for me. It was a blessing to know that I helped my community know what to do before it is too late should they have a stroke.”

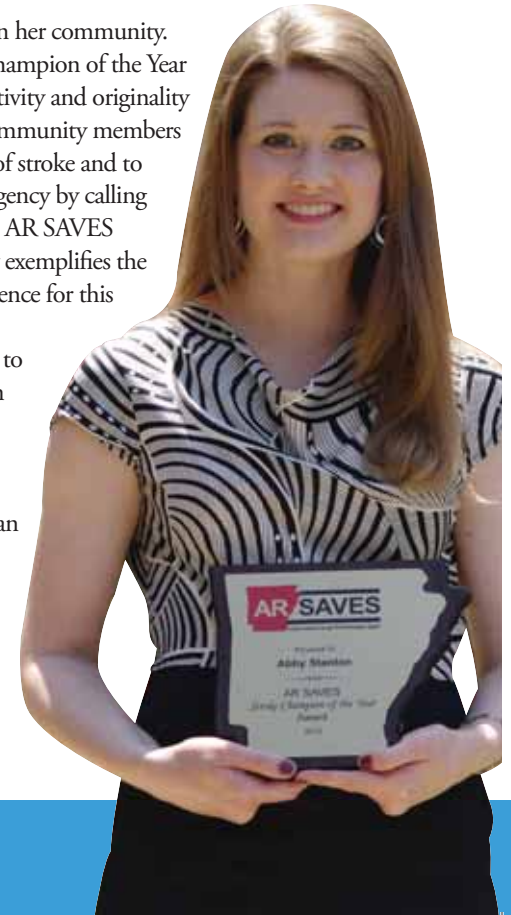
Working with AR SAVES, the Harding College pharmacy student provided stroke education to civic, church, and women’s groups as well as to Entergy Arkansas’ safety committee. She also organized the Swing Out Stroke golf tournament, one of AR SAVES’ largest educational events, and promoted the tournament on the Country 97.3 FM Morning Show.

Staton, a pharmacist at Coker-Hampton Drug Co. in Stuttgart, received the AR SAVES Champion of the Year award for her innovative and passionate commitment to

raising stroke awareness in her community.

“The AR SAVES Champion of the Year award highlights the creativity and originality of a person to educate community members about the warning signs of stroke and to treat it as a medical emergency by calling 911,” said Rick Washam, AR SAVES program manager. “Abby exemplifies the highest standard of excellence for this award.”

“It is truly an honor to receive the award,” Staton said. “I look forward to volunteering even more with AR SAVES, and to make Swing Out Stroke an annual event.”



Strong Partnership

Arkansas Department of Human Services and UAMS CDH

The UAMS Center for Distance Health's partnership with DHS has been long and successful when looking at ways to better care for Arkansans utilizing telehealth. We appreciate this collaboration and guidance in moving medicine and health care forward for the betterment of everyone in Arkansas.



Andy Allison
*Division Director, Division of
Medical Services AR DHS*



Sheena Olson
*Assistant Director, Division of
Medical Services AR DHS*

Events Raise Awareness, Honor Survivors

What started as a new way to educate the public about stroke is becoming an Arkansas baseball tradition. AR SAVES leaders, staff and volunteers again this year reached out to baseball fans at Strike Out Stroke events in North Little Rock and Springdale.

Stroke survivors threw strikes against stroke at the AR SAVES Strike Out Stroke night June 13 at Dickey-Stephens Park in North Little Rock before an Arkansas Travelers game against the Tulsa Drillers. On April 4, survivors did the same at Arvest Park in Springdale before a game pitting the Northwest Arkansas Naturals against the Midland Rockhounds.

Volunteers from AR SAVES sites around the state worked at stroke education booths at the ballparks to distribute information and answer questions, and brain-shaped stress balls were thrown into the stands.

“These two events really put us over the top in the number of contacts it allows us to expose our message to about stroke,” AR SAVES Director Michael Manley said. “Not only do we reach the fans that are there, but also those who listen by radio as well as the news coverage we receive. It’s priceless and a real home run for our program and the

people we serve.”

In late May, South Mississippi County Medical Center in Osceola joined in the tradition with similar efforts at its own Strike Out Stroke event at a Little League game.

Tackle Stroke Nights at several high school football games in the fall of 2012 provided similar opportunities to inform the public about AR SAVES and to raise stroke awareness.

Volunteers along with staff from UAMS and AR SAVES partners organized a wide variety of initiatives throughout the year to raise public awareness. They included more than 110 outreach efforts such as booths at health fairs; presentations to schools, churches and civic groups; and media interviews.





Focused on the Community

By Lauren Farabough

Fans at sporting events usually walk away with souvenirs of programs or team paraphernalia. But this year at two high schools in North Arkansas, fans walked away with a lot more — how to save someone having a stroke.

Those educational efforts and others earned Baptist Health Medical Center — Heber Springs the AR SAVES Site of the Year Award.

“They are an outstanding site and making a great impact in their community through stroke treatment and community stroke education,” said Rick Washam, AR SAVES program manager of health education.

Starting July 2012 the medical center has done at least two community projects each month. At the Rose Bud High School football team’s Senior Night in October, it was a “Tackle Stroke Night” with medical center staff members passing out posters, pens, bracelets and other items on stroke. They threw more than 200 brain-shaped stress balls into the crowd, and the cheerleaders created a cheer on stroke that was recorded.

In February, Heber Springs High School had a Slam Dunk Stroke Night where the medical center had a booth with stroke materials. “We were amazed at how young kids

wanted to go back and get the word out to their families with the information we gave them,” said Debra Johnston, AR Saves nurse facilitator.

Baptist Medical Center – Heber Springs also distributed pamphlets, displays and brochures in prominent places around the hospital and community. Next year’s goal is to produce a commercial for local public television.

The materials and events emphasized the need to recognize stroke symptoms sooner and immediately go to the hospital, where early treatment can save lives. Johnston said they still have patients who delayed coming to the ER though they started experiencing stroke-like symptoms days earlier.

The center is also improving its emergency room protocol by incorporating the latest computer technologies and educating emergency medical personnel how to give the hospital advance notice of a stroke patient. They have also worked with volunteers in the hospital to emphasize critical information that is needed from stroke patients.

“We appreciate the dedication and help we get from the AR SAVES program,” said Debra Johnston. “This makes a huge difference, and it’s why we are able to do what we do for our community.”



Physician Adds Own Story to Stroke Efforts

On Dec. 9, 2012, Robert Scott, M.D., had a stroke, became an AR SAVES patient and gained a new mission — stroke education.

A former general surgeon, Scott now is a primary care physician and medical director working for the Daughters of Charity at St. Elizabeth Health Center in Gould and DePaul Health Center in Dumas. He has always tried to educate his patients about stroke and the kind of healthy lifestyles that can reduce their stroke risk, but now he can add the story of his own experience.

Scott lost almost all control he had over the right side of his body and lost most of his ability to communicate. After his wife drove him to McGehee Hospital, and less than three hours later, he had regained all his function with help from University of Arkansas for Medical Sciences (UAMS) neurologist Sami Harik, M.D., the AR SAVES program and the hospital's staff.

The nurses and physicians at McGehee quickly set up an AR SAVES video connection to UAMS for a neurological evaluation. The doctor recommended a clot-busting drug for Scott, and the McGehee staff administered it to him through an intravenous drip. An hour later his condition was normal.

AR SAVES added something extra to the superlative care he received, Scott said.

Driving two hours from his home to UAMS would have caused a delay in treatment that could have led to lasting neurological damage. AR SAVES brought neurological expertise there quickly and when it was needed.

And should he have experienced neurological damage, it could have affected health care in general in Dumas and Gould.

“It would have put things in a bind here,” Scott said. “It also would have sidelined the nurse practitioners because they work under my license while I’m here. Sorting that out and getting a substitute physician in here would have taken weeks. Local physicians probably would have become even more burdened.”

This spring, Scott spoke at the AR SAVES Telestroke Conference, threw a ceremonial pitch at an Arkansas Travelers game as part of the Strike Out Stroke public education event in North Little Rock, and has kept driving home the message to patients in his own practice.

He hands out education materials to patients, and hopes to include a larger stroke education component to an annual Hispanic health fair this fall in Dumas.

White River Medical Center Changing the Rural Health Care Landscape

By Holland Doran

As one of the first hospitals to join the AR SAVES program in 2009, White River Medical Center (WRMC) in Independence County is transforming stroke care in the rural setting. Stroke is the leading cause of disability in Arkansas. By joining the AR SAVES program, WRMC patients have speedier access to stroke care, which can avert disability and death in many instances.

“It is vital that White River Medical Center creates partnerships with UAMS and AR SAVES to change the landscape of rural medicine,” Chief Nursing Officer Dede Strecker said. “AR SAVES has significantly improved the quality of life for our stroke patients. The program is vital to reduce permanent, stroke-related disability.”

In addition, the program has enhanced the medical center’s ability to shorten wait times and improve patient health outcomes for all patients. Now patients enter the emergency room, they are immediately paired with a physician and receive a CT scan for a proper and quick diagnosis.

“What AR SAVES has changed is how we treat all patients,” WRMC Trauma Registrar Stacy Wright said. “This system is improving the ER’s patient volume and helps us keep more patient rooms available.”

The stroke program has made it easier for Janie Evans B.S.N., AR SAVES facilitator and WRMC Trauma Program manager, to

save lives in her community. Evans, a certified critical care nurse who has worked at WRMC since 1984, believes AR SAVES is a vital, life-saving tool.

“Today living in a rural community doesn’t mean that you have to sacrifice access to health care,” Evans said. “AR SAVES is a valuable asset, as it covers all the rural areas of the state and enables all patients in Arkansas to receive this state-of-the-art benefit.”

Evans has received the AR SAVES Facilitator of the Year Award for her creativity in educating others about stroke. A few of her projects from this year include teaching new nursing orientations, speaking to senior citizen and church groups, handing out promotional items at fairs and educating student groups.

“The award is validation of my ability to do my job successfully,” Evans said. “The award also recognizes my efforts to educate the public and nursing personnel about stroke and the need to recognize the signs and symptoms. It is an honor to accept the award.”



Stronger Call Center Support

In 2012, AR SAVES continued to grow and look for more efficient ways to meet the increased stroke referral calls and additional educational needs of our partner sites. Our call center nurses have done an outstanding job, but with growth come new challenges. Our new primary Paramedic Call Team, with the continued nurse support, will give that added structured clinical value to our program.

This will efficiently utilize our resources to cover more sites by:

1. Allowing more access for our partner sites for mocks and clinical education which will increase better outcomes.
2. Focusing to coordinate and decrease door-to-needle times for stroke patients, as well as collect additional data for QI purposes.
3. Assisting with education to the EMS providers across Arkansas about stroke care and protocols.

We welcome this new addition to our AR SAVES team and look forward to the continued progress of assisting the stroke patients across the state.



Scott Gann, NRP, Telemedic, John Tackett, NRP, Telemedic, Karen Cumming, NRP, Telemedic, Calvin Duncan, NRP, Telemedic

AR SAVES Health Educators

The Community Health Educators pictured below are responsible for facilitating community stroke education in their assigned sites, assisting AR SAVES Nurse Facilitators in presentations and community events and educating hospital staff in 41 hospitals across Arkansas. They educate the public on the warning signs of stroke and the need to identify stroke as a medical emergency. The SAVES educators facilitate the planning and organizing of AR SAVES for group and community needs.

They also develop and maintain cooperation between public, civic, professional and voluntary agencies as well as prepare and disseminate stroke educational and informational materials throughout these communities. Stroke education is the key to successful stroke treatment by getting patients to recognize the symptoms of stroke, calling 911 and arriving at the hospital within the 3 hour timeline for treatment.

Lauren Scott, Health Education Specialist, Yvette Burton, Health Education Specialist, Rick Washam, Health Education Manager



Outreach Nurses

The Outreach Nurses pictured below are responsible for the daily workings of the AR SAVES program. Their job duties include being a nurse liaison for the vascular neurologists, following up on patient's conditions, to providing initial training for new sites and ongoing training for existing sites. These trainings come in the form of

“in-person” (on-site), IAV, email, mocks, and phone. Each nurse is responsible for a select group of hospitals that range from critical access to larger facilities who all lack the need for AIS acute care. In accomplishing these roles the outreach nurses for the AR SAVES require flexibility, creativity, and a vision that is not seen in many other programs. This group is very compassionate about this program, and together with the other integral parts of the AR SAVES team makes for an outstanding program which is leading the way in stroke telemedicine.



*Loretta Williams, Outreach Nurse,
Debi Johnson, Tiffany Morgan, Outreach
Nurse, David Wollard, Outreach Nurse,
Delbert McCutchen, Outreach Nurse*

AR SAVES Program Team

Any highly functional working system is only as good as the infrastructure it is working on. Our AR SAVES Program team makes it possible for all the inner-workings of AR SAVES to carry out our mission. Whether technical, data, or relationship driven, the Program Team works seamlessly with the other areas of AR SAVES to ensure the best possible outcomes are provided. The AR SAVES Program team ensures we are all working smarter and not harder by leveraging all available resources for our programmatic deliverables.

*Rachel Hogbin, Administrative Specialist,
Conelia Williamson, Administrative Coordinator,
Phillip Martin, Video Conference Specialist*

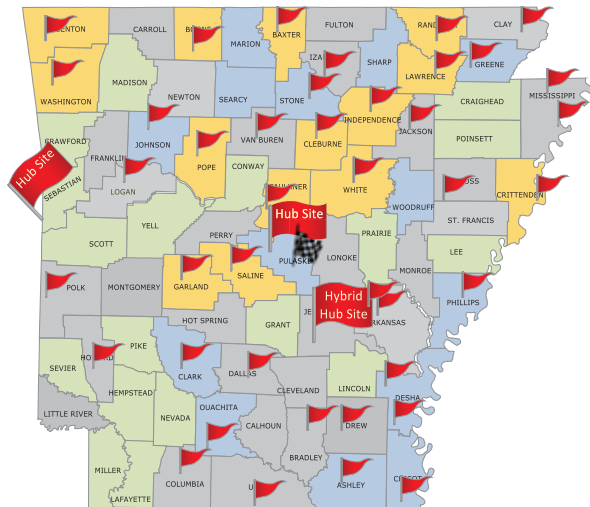


Spoke Sites Facility/City	FY 2013 Totals		
	Referrals	iPA Administration	Mocks
Arkansas Methodist/Paragould	14	4	12
Ashley Co MC/Crossett	10	5	11
Baptist Health /Arkadelphia	14	3	9
Baptist Health /Heber Springs	19	5	11
Baptist Health/Stuttgart	6	2	11
Baxter Reg/Mountain Home	48	12	12
Booneville	1	0	9
Bradley County MC/Warren	6	4	19
Chicot Memorial/Lake Village	9	2	9
Conway Regional/Conway	29	12	25
CMC/Izard Co/Calico Rock	2	0	10
Crittenden /West Memphis	17	3	9
CrossRidge Community Hospital/Wynne	5	0	14
Dallas Co/Fordyce	3	1	9
Delta Memorial/Dumas	4	1	10
Dewitt	1	0	9
Drew County MC/Monticello	6	0	11
Five Rivers MC/Pocahontas	11	0	12
Great River MC/Blytheville	3	2	11
Harris Hospital/Newport	5	1	9
Helena Regional MC/ Helena	9	3	10

Spoke Sites Facility/City	FY 2013 Totals		
	Referrals	tPA Administration	Mocks
Helena Regional MC/ Helena	9	3	10
Howard Memorial /Nashville	1	0	12
Johnson Reg/Clarksville	9	2	5
Lawrence Memorial/Walnut Ridge	12	3	33
Magnolia Regional MC/ Magnolia	6	2	12
McGehee/Desha	5	4	11
Mena Regional MC/ Mena	8	3	11
MCSA/Eldorado	1	0	22
National Park/Hot Springs	27	3	15
North AR Regional /Harrison	39	5	13
Northwest MC/Bentonville	21	6	12
Ouachita CO/Camden	5	0	7
Ozark Health MC/Clinton	9	6	20
Piggott	7	3	18
Saline Memorial/Benton	25	9	11
SMC/Osceola	2	1	31
St Mary's/Russellville	49	17	9
Stone Co MC/ Mt. View	7	0	23
Washington Reg/Fayetteville	38	6	12
White County MC/Searcy	72	19	12
White River MC/Batesville	36	6	12
TOTALS	594	151	515

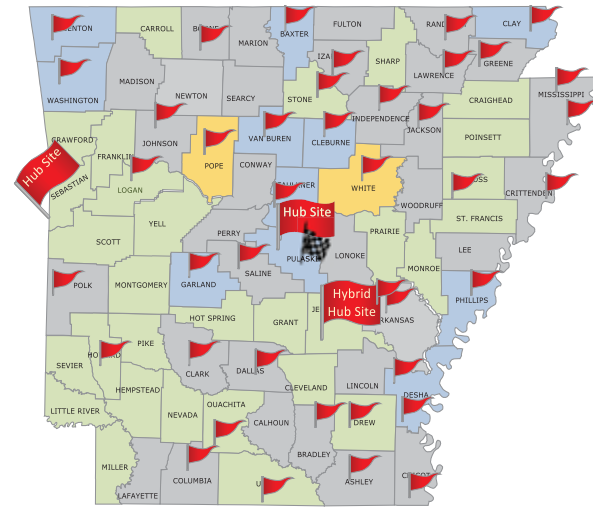
Name	City	County	Name	City	County
*UAMS Medical Center	Little Rock	Pulaski	North Arkansas Regional Medical Center	Harrison	Boone
*Sparks Health System	Fort Smith	Sebastian	Baptist Health Medical Center –Heber Springs	Heber Springs	Cleburne
**Jefferson Regional Medical Center	Pine Bluff	Jefferson	Helena Regional Medical Center	Helena	Phillips
***St. Vincent Medical Center/North	Sherwood	Pulaski	National Park Medical Center	Hot Springs	Garland
Baptist Health Medical Center – Arkadelphia	Arkadelphia	Clark	Chicot Memorial Medical Center	Lake Village	Chicot
White River Medical Center	Batesville	Independence	Magnolia Regional Medical Center	Magnolia	Columbia
Saline Memorial Hospital	Benton	Saline	McGehee Hospital Inc.	McGehee	Desha
Northwest Medical Center	Bentonville	Benton	Mena Regional Health System	Mena	Polk
Great River Medical Center	Blytheville	Mississippi	Drew Memorial Hospital	Monticello	Drew
Booneville Community Hospital	Booneville	Logan	Baxter Regional Medical Center	Mountain Home	Baxter
Community Medical Center of Izard County	Calico Rock	Izard	Stone County Medical Center	Mountain View	Stone
Ouachita County Medical Center	Camden	Ouachita	Howard Memorial Hospital	Nashville	Howard
Crittenden Regional Medical Center	West Memphis	Crittenden	Harris Hospital	Newport	Jackson
Johnson Regional Medical Center	Clarksville	Johnson	South Mississippi County Regional Hospital	Osceola	Mississippi
Ozark Health Medical Center	Clinton	Van Buren	Arkansas Methodist Medical Center	Paragould	Greene
Conway Regional Medical Center	Conway	Faulkner	Piggott Community Hospital	Piggott	Clay
Ashley County Medical Center	Crossett	Ashley	Five Rivers Medical Center	Pocahontas	Randolph
Dewitt Hospital and Nursing Home	DeWitt	Arkansas	White County Medical Center	Searcy	White
Delta Memorial Hospital	Dumas	Desha	Baptist Health Medical Center – Stuttgart	Stuttgart	Arkansas
Medical Center of South Arkansas	El Dorado	Union	Lawrence Memorial Hospital	Walnut Ridge	Lawrence
Washington Regional Medical Center	Fayetteville	Washington	Bradley County Medical Center	Warren	Bradley
Dallas County Medical Center	Fordyce	Dallas	CrossRidge Community Hospital	Wynne	Cross

- * Hub Site
- ** Hybrid Hub Site
- *** Affiliate



- No Consults
- 1 – 4 Consults
- 5 – 9 Consults
- 10 + Consults

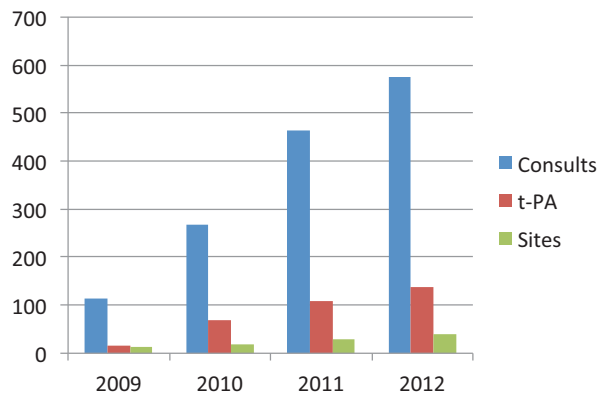
Total AR SAVES Consults
FY 2013



- No Consults
- 1 – 4 Consults
- 5 – 9 Consults
- 10 + Consults

Total AR SAVES tPA Delivery
FY 2013

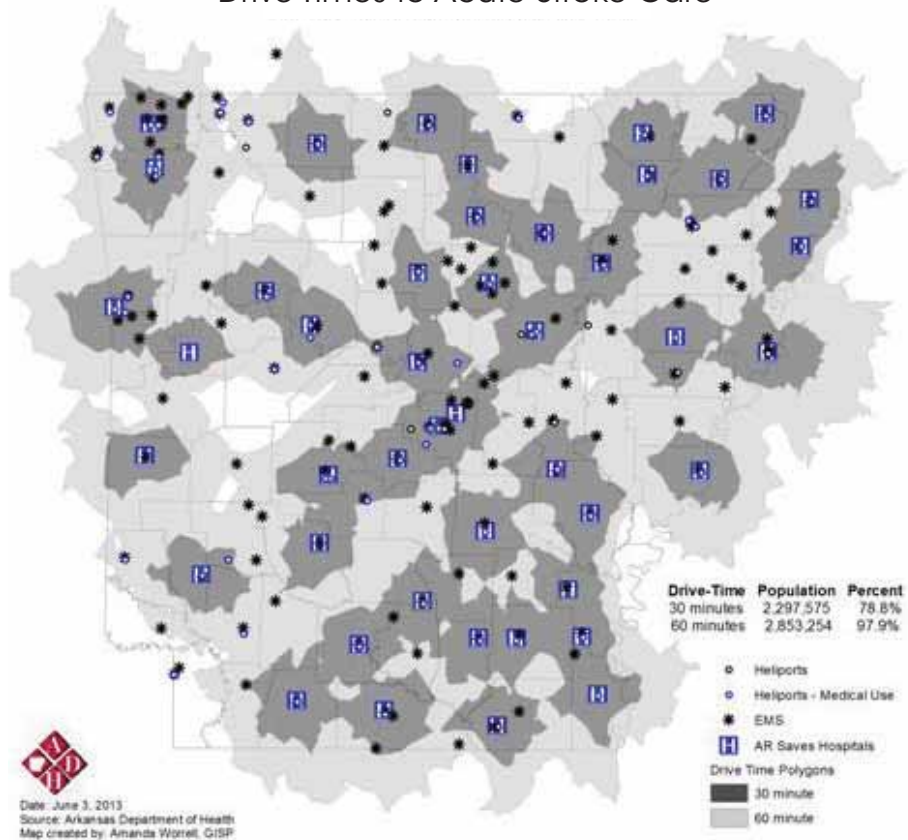
AR SAVES Clinical Data



Median Times



Drive Times to Acute Stroke Care



Message from the Director



AR SAVES: Staying On Course

Coming up on my 10th year in telehealth in Arkansas, AR SAVES has been an amazing program to watch develop and grow over the past four and half years. Going full speed with three hub and 41 Spoke sites across the state, Arkansas is finally making a huge progression in treating acute ischemic stroke

patients and having better outcomes. This past year we added several new sites. We have also focused on continually better serving those hospitals who have been participating since inception. Some of these improvements which we are implementing include:

1. The AR SAVES call center is now staffed with paramedics 24/7 to facilitate acute stroke events
2. A wider variety of technology will be utilized in order to efficiently better educate our professional staff in our sites state wide.

3. Detailed data will start being utilized to determine and target resources for professional and community educational endeavors.
4. Ensuring our public outreach continues to grow in order to get Arkansans to recognize and more importantly act FAST on the symptoms of stroke.

Continuing to increase the quality of the AR SAVES program is of the utmost importance. Arkansans should know that the AR SAVES physicians and staff will continue to work hard to decrease the unnecessary poor outcomes of stroke for all Arkansans.

A handwritten signature in black ink that reads "Michael Manley, MD". The signature is written in a cursive style with a horizontal line underneath the name.

Michael Manley, MNSc
AR SAVES Director
CDH Outreach Director

From the Medical Director:



Over the last year, AR SAVES has added five more sites for a total of three hub and 41 Spoke sites, now making critical stroke care within a 30-minute drive of more than 70 percent of the population in Arkansas, while more than 97 percent is within 60 minutes. This has increased the number of monthly consultations as well as the percentage of those consults that

result in the administration of tPA, further increasing the impact of the program on stroke care in our state.

From November 2008 through June 2013, 24 percent of more than 1,700 consults resulted in 417 patients treated with tPA, making AR SAVES a tremendously successful program that has saved health care dollars but most importantly decreased mortality and disability from stroke and changed the lives of patients and families across the state.

This success could not be possible without the outstanding efforts to increase stroke awareness in our community, to cooperate with our EMS services, to train our sites' doctors and nurses, as well as the continuous education within our hub hospitals multidisciplinary stroke teams.

We are committed to reduce the burden of stroke in Arkansas. Both AR SAVES hub hospitals and most of its sites are

participating in the Arkansas Stroke Registry led by the Arkansas Department of Health with the support of important state and federal grants and are submitting data from all stroke patients through the "Get with the Guidelines" program. This registry will help local hospitals adhere to the best standards of care, to benchmark their performance and establish improvement plans to deliver the best stroke care.

Our goals for next year are to further increase the coverage of Arkansans, promote stroke awareness, encourage all sites to participate in the Arkansas Stroke Registry, increase thrombolysis rate and assist all sites to decrease the time it takes for a patient to be administered the clot-busting drug after entering the emergency room door.

I am honored to serve as the AR SAVES medical director and to be part of this great team of health care professionals dedicated with enthusiasm to improve the health of Arkansans.

Sincerely,



Nicolas Bianchi, MD
Medical Director AR SAVES
Assistant Professor of Neurology
College of Medicine
University of Arkansas for Medical Sciences



Margaret Tremwell, M.D.



Vladimir Karpitskiy, M.D.
Ph.D.



Archana Hinduja, M.D.

AR SAVES