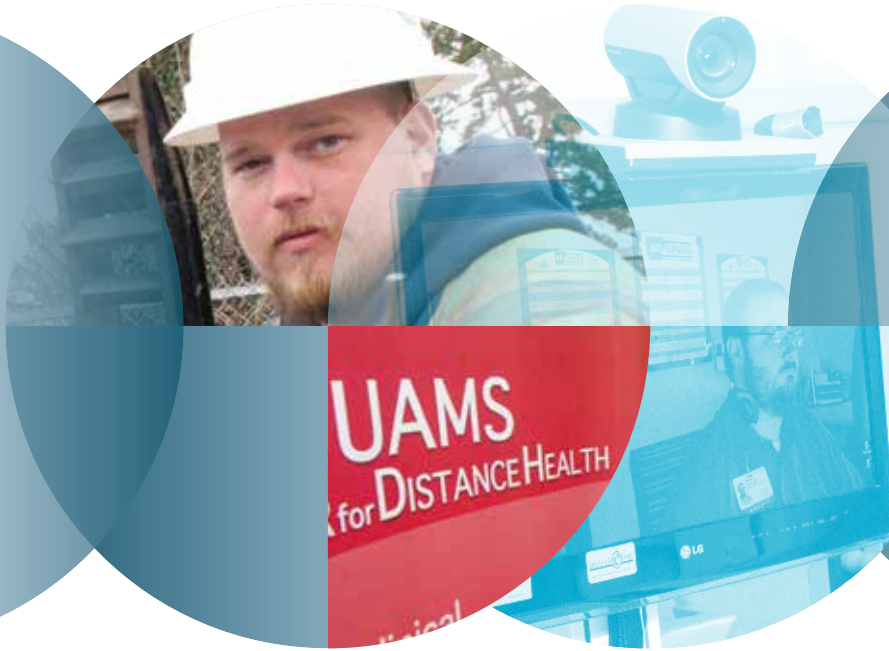


AR SAVES



2014
ANNUAL REPORT

Table of Contents

Leadership	1
500th Stroke Patient	2
DHS and CDH	5
Events	6
AR SAVES Team	13
AR SAVES Biographies	14
5th Annual Stroke Conference	16
AR SAVES Spoke Sites Data	18
AR SAVES State Data	20
AR SAVES Overview	22
Message from the Director	27
Message from the Medical Director	28
What's Next	29



Tina Benton, RN
Director, Center for
Distance Health



April Cowart, MA
Business Manager

The Center for Distance Health exists to facilitate distance health implementation of educational, clinical, research, and outreach opportunities, including the effective management of needs assessments and efficient resource matches to eliminate disparities in health care.


Once again AR SAVES has set the standard for delivering patient outcome driven ischemic stroke care here in Arkansas. We are pleased to offer you this annual report for FY 2014. Now covering 44 emergency departments all over the state, our patient numbers are increasing as well as seeing our door to needle times decreasing. We have reached milestones as you will see in this report as well reaching more Arkansans than we have in the previous four years. We stopped and celebrated our 500th Activase case but know we still have more work to be done. Because of the success of AR SAVES, other trauma and subspecialty programs are following suit in providing better care in a timely manner to Arkansans. We look forward to treating the next 500+ stroke patients as well as continuing to lead the nation in tele-stroke care.

Sincerely,



Curtis L. Lowery, MD



A photograph of a man and two children at a playground. The man is in the foreground, smiling, wearing a plaid shirt. A young boy is sitting on his shoulders, and a young girl is sitting on the man's arm. They are all smiling. The background shows green metal playground equipment and trees.

“I’m sure if this happened again, and I could speak to the paramedics, I’d be telling them to get me to a SAVES site.”

500th Stroke Patient Grateful for Recovery

By Ben Boulden

Dustin Martinez's truck crashed through a mailbox, three culverts and hit a tree before he found himself in a hospital as the 500th stroke patient to receive a powerful blood-clot dissolving agent, t-PA, through the AR SAVES stroke network.

Before Martinez had his stroke on a Monday morning in November 2013, the 29-year-old husband and father of two had experienced a weekend of painful headaches. Martinez, a heavy-equipment operator, was on his way to the Conway construction company where he works. His vision was spotty, and he remembers being confused at a stoplight before realizing it was green and proceeding on through an intersection.

Just as he was reaching with his right hand for a cigarette, he believes his hand went numb and limp,

falling from the wheel. His memory of the truck he was driving running off the road isn't clear.

Paramedics rushed him first to Conway Regional Medical Center, one of 41 AR SAVES sites at hospitals statewide. Along with his wife, he took part in a medical consultation via an AR SAVES video teleconference with Margaret Tremwel, M.D., at Sparks Regional Health System in Fort Smith. She recommended he receive t-PA and transportation by helicopter to UAMS Medical Center for additional care.

Before his stroke, Martinez had high blood pressure, which may have been a factor in creating a tear in his carotid artery. A blood clot coming loose from the tear and entering his brain is a likely cause of the stroke.

>>

Martinez spent the next four nights at UAMS and by the time he was released he had regained his ability to walk. Although he has some remaining numbness in his left hand, he has no other functional deficits and by Jan. 13 had returned to work.

“I’m sure if this happened again, and I could speak to the paramedics, I’d be telling them to get me to a SAVES site,” Martinez said. “I haven’t had a cigarette since that day. I’ve also changed my diet for the better.”

At UAMS, neurologist Archana Hinduja, M.D., and interventional radiologist Eren Erdem, M.D., oversaw his treatment and care.

“Although UAMS and AR SAVES have many stories like his, Dustin Martinez’s story is a great illustration of a core part of the UAMS mission — reaching out to other areas of the state to improve patient outcomes while helping local physicians identify patients with stroke. The state of Arkansas is amazing in that we can all work together to improve health care for all Arkansans,” said Michael Manley, outreach director for the UAMS Center for Distance Health and director of AR SAVES. 🇺🇸



Arkansas Department of Human Services and University of Arkansas for Medical Sciences 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 healthcare forward for the betterment of everyone in Arkansas.

Dawn Stehle, Ph.D.



Dawn Stehle began her career with DHS in August 2006 as a fellow working in Medicaid before landing a permanent position with the agency as a policy analyst in January 2007. She quickly rose through the ranks of the agency,

becoming the DHS Policy and Planning director in April 2008.

Four years later, she was named Medicaid's Director of Health Care Innovation. In that position, she led the nationally-acclaimed Arkansas Health Care Payment Improvement Initiative, which aims to create a more efficient and effective statewide health care system.

She began serving as Interim Director for the Arkansas DHS' DMS June 2014. On August 26th, she was appointed Director of the Division of Medical Services, tasked with providing health care to hundreds of thousands of Arkansas children, people with disabilities and people in the first-of-its-kind Private Option.

Dawn has previously worked with the William J. Clinton Foundation's HIV/AIDS Initiative, the Delta Bridge Project, and as an AmeriCorps VISTA* (Volunteers in Service to America).

She has a bachelor's degree in biology and social work from the University of South Dakota, a master's degree from the University of Arkansas's Clinton School of Public Service and is completing her doctorate of public health at the University of Arkansas for Medical Sciences.

Events Raise 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

Strike out Stroke Night at the Naturals

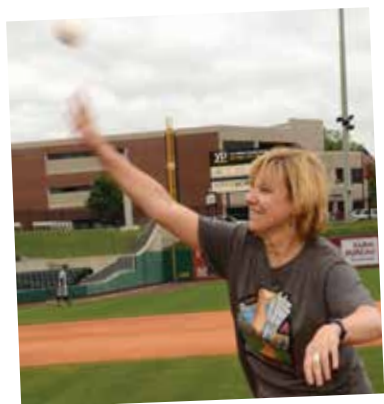
Dustin Martinez, AR SAVES' 500th patient to receive a blood-clot dissolving agent, and Roxane Townsend, M.D., UAMS Medical Center CEO, threw their strikes against stroke May 13 at the AR SAVES Strike Out Stroke Night during a pregame ceremony at an Arkansas Travelers game against the Northwest Arkansas Naturals. On April 10, survivors did the same at Arvest Park in Springdale before a game pitting the Northwest Arkansas Naturals against the Frisco, Texas Rough Riders – both games featuring teams from Minor League Baseball's Class AA Texas League.

included more than 1,000 outreach efforts such as booths at health fairs; presentations to schools, churches and civic groups; and media interviews.



In 2014 **1,164** community events were held
with over **386,100** attendees
performed by our **44** hospital partners

Strike out Stroke Night at the Arkansas Travelers



North Central Race Association Race

Volunteers along with staff from UAMS and AR SAVES supported a booth at the race event in Flippin.

Along with announcements there were interviews with fans during the intermission.



F.A.S.T. 5K Walk/Run

Thanks to advertising the 5K race in the Paragould Daily Press on Thursday May 27th there were 57

participants plus 10 volunteers for the race. All the participants received a free T-shirt.



Tackle Stroke Nights Around Arkansas

Tackle Stroke Night at Quitman High School Homecoming, with Stroke Survivor Dr. P. Coates arriving by Med flight with football. There were approximately 300 attendees.



Lawrence Memorial Tackle Stroke Night at Hoxie Playoff Football Game. A Stroke Survivor was provided EMS transport so she could watch her two grandsons play while two Stroke Survivors were honored at the game.



Harris Hospital Tackle Stroke Night at Newport. A Stroke Survivor throws out the game ball.



Arkansas Methodist Medical Center Tackle Stroke Night at Paragould.



Meet the Jackets Tackle Stroke Night at Mountain View.



The Slam Dunk Stroke Event

Hosted by the Arkansas Methodist Medical Center in Paragould, it brought in approximately 1,000 attendees where AR SAVES materials were handed out in the crowd.



AR SAVES Staff

Director's



Michael Manley, R.N.
Director AR SAVES



Nicolas Bianchi, M.D.
Medical Director

RN's



Delbert McCutchen, R.N.



Tiffany Morgan, R.N.



David Wollard, R.N.



Debi Johnson, R.N.

Administration



Conelia Williamson



Ashley Moskow

Community Educator's



Lauren Scott



Rick Washam



Yvette Burton

Activase given
to over **600**
patients in **5** years

IT



Phillip Martin

Call Center



Calvin Duncan, NRP



Lee Brown, NRP



Karen Cumming, NRP



John Tackett, NRP



Jackie Collins, LPN

AR SAVES Biographies

Nicolas A. Bianchi, M.D.

Nicolas A. Bianchi, M.D., is the AR SAVES medical director and UAMS Stroke Program director leading the stroke service and working toward continued certification of UAMS as primary stroke center.

“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 Arkansas,” he said.

Bianchi completed his residency in internal medicine in 2005 in Argentina and then completed neurology residency training at the University of Miami-Jackson Memorial Hospital in 2010. He stayed in Miami for a fellowship in vascular neurology before joining the UAMS Department of Neurology as an assistant professor in August 2011. He is board certified in neurology and is vascular neurology board eligible. He is a member of the American Heart Association and serves on the Stroke Council.



Archana Hinduja, M.D.

Archana Hinduja, M.D., is an assistant professor of neurology in the UAMS College of Medicine and is one of the on-call neurologists for the AR SAVES program.

“Treating a stroke patient through the AR SAVES program is just like treating my own patients here at UAMS, just virtually. Being able to provide that kind of support all over Arkansas really adds an unexpected element to my daily practice,” said Hinduja.

She received her medical degree from Coimbatore Medical College in Coimbatore, India. She served a residency in neurology at Seton Hall School of Graduate Medical Education with New Jersey Neuroscience Institute at Edison, N.J. She also completed a fellowship in Neurocritical care at the Cleveland Clinic Foundation in Cleveland, Ohio.

Hinduja is a member of the American Academy of Neurology, Neurocritical Care Society, and of the Society of Critical Care Medicine.



5th Annual AR SAVES Stroke Conference

JR Looper, AR SAVES facilitator and Erin Berry, AR SAVES backup facilitator

North Region Site of the Year

This award is given by the AR SAVES Awards Committee to the site showing exemplary contribution through the use of modern technology and best practices for standards of stroke care in their community.

**North Arkansas Regional Medical Center
in Harrison**



South Region Site of the Year Medical Center of South Arkansas in El Dorado



Tonya Barnett, AR SAVES facilitator

Nurse Facilitator of the Year



Brooke Keith at Ozark Medical Center in Clinton

Stroke Champion of the Year



Air Evac Lifeteam

Physician Champion of the Year



Jamie Pritchard, M.D.

AR SAVES Sites around Arkansas

Spoke Sites	FY 2014 Totals					
Facility/City	Referrals	tPA Administration	No TPA Given	Mocks	# Community Events	# Community Attendees
Arkansas Methodist/Paragould	6	2	4	15	33	43,187
Ashley Co MC/Crossett	7	4	3	14	32	2,852
Baptist Health /Arkadelphia	16	2	14	9	37	5,465
Baptist Health /Heber Springs	11	5	6	12	32	6,440
Baptist Health Malvern	1	0	1	9	4	4,583
Baptist Health Stuttgart	9	4	5	11	26	2,756
Baxter Reg/Mountain Home	49	9	40	16	32	10,587
Mercy Booneville	6	1	5	10	28	3,606
Bradley County MC/Warren	4	2	2	7	25	2,150
Chambers Memorial	1	0	1	0	5	377
Chicot Memorial/Lake Village	8	1	7	9	23	1,116
Conway Regional/Conway	49	15	34	39	47	33,696
CMC/Izard Co/Calico Rock	5	2	3	10	32	7,241
Crittenden /West Memphis	2	0	2	1	0	0
CrossRidge Community Hospital/Wynne	1	0	1	12	22	1,806
Dallas Co/Fordyce	9	2	7	10	27	2,096
Delta Memorial/Dumas	5	2	3	32	21	1,523
Dewitt	3	0	3	10	25	1,690
Drew County MC/Monticello	10	3	7	9	24	3,244
Five Rivers MC/Pocahontas	13	2	11	12	24	1,372
Great River MC/Blytheville	4	1	3	14	24	2,846
Harris Hospital/Newport	4	1	3	10	25	10,838
Helena Regional MC/ Helena	3	0	3	13	30	6,599

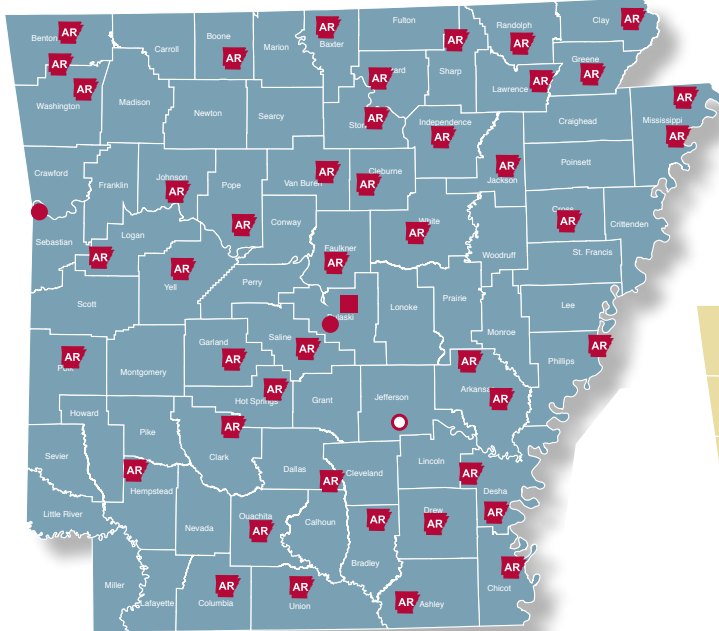
Spoke Sites	FY 2014 Totals					
Facility/City	Referrals	tPA Administration	No TPA Given	Mocks	# Community Events	# Community Attendees
Howard Memorial/Nashville	8	2	6	10	21	1,656
Johnson Reg/Clarksville	13	1	12	5	31	1,571
Lawrence Memorial/Walnut Ridge	7	2	5	5	34	4,207
Magnolia Regional MC/ Magnolia	1	0	1	17	26	11,047
McGehee/Desha	3	3	0	10	12	2,256
Mena Regional MC/ Mena	6	4	2	6	23	3,856
MCSA/Eldorado	14	7	7	18	28	4,472
National Park/Hot Springs	35	17	18	12	33	3,764
North AR Regional /Harrison	53	15	38	12	30	21,752
Northwest MC/Bentonville	30	9	21	10	36	48,957
Northwest MC/Springdale	10	1	9	25	18	46,008
Ouachita CO/Camden	6	2	4	5	19	1,269
Ozark Health MC/Clinton	18	9	9	20	42	7,312
Piggott	4	1	3	12	45	28,397
Saline Memorial/Benton	24	11	13	11	24	2,128
SMC/Osceola	1	0	1	19	25	2,910
St Mary's/Russellville	33	8	25	17	25	1,392
Stone Co MC/ Mt. View	12	2	10	9	27	7,957
Washington Reg/Fayetteville	73	21	52	17	28	13,611
White County MC/Searcy	40	15	25	13	26	2,129
White River MC/Batesville	20	9	11	12	32	12,912
White River/Cherokee Village	0	0	0	0	1	500
FY 2014 TOTALS	637	197	440	549	1,164	386,133

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

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

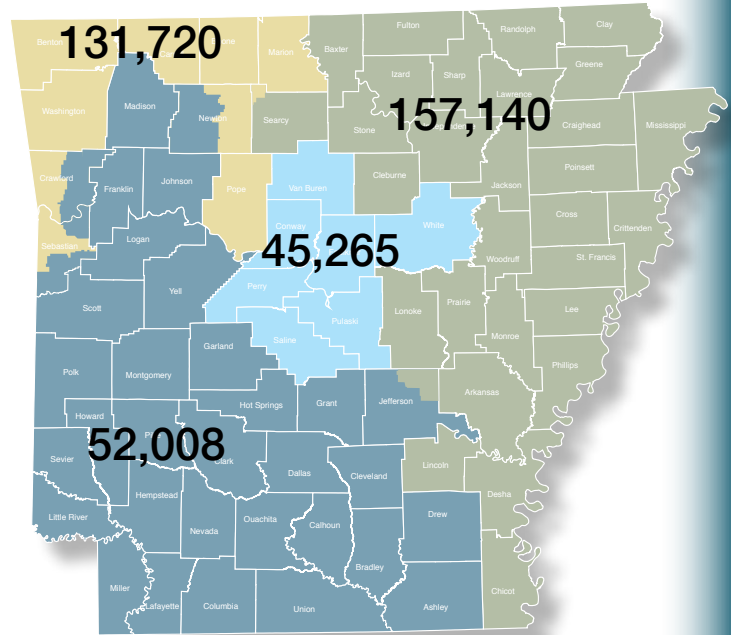
AR SAVES added four more hospitals to its network in FY 2014 for a **Total of 44** participating spoke sites

AR SAVES Sites FY 2014



- AR SAVES Sites
- Hub Site
- ◉ Hybrid Hub Site
- Affiliate Site

Number of Community Outreach per Congressional Districts FY 2014

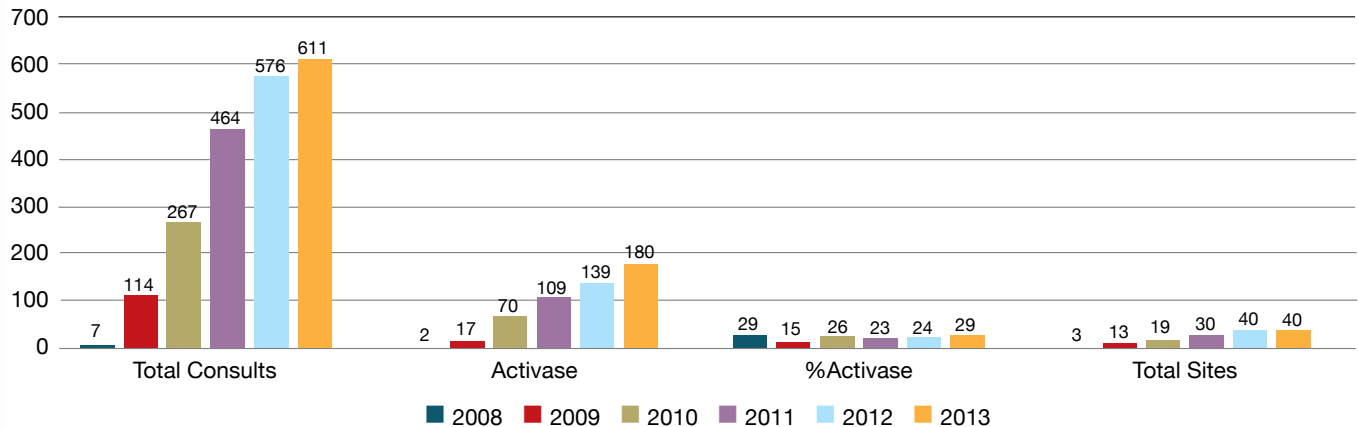


■ District 1
 ■ District 2
 ■ District 3
 ■ District 4

AR SAVES Overview

AR SAVES began over five years ago with the intent of utilizing national best stroke guidelines published by the American Heart Association, better known as Get With The Guidelines (GWTG). Over the past 5+ years we have grown to 44 sites at the end of FY 2014, delivering this critical stroke care to acute ischemic stroke patients. Just last year our referrals went up 22%, averaging the delivery of tPA to 29% in 2013.

A report published in *Neurosurgery*, October 2013 by Dr. Stavropoula Tjoumakaris and colleagues of Thomas Jefferson University Hospital, showed that in 28 community hospitals covered by Telestroke in there network delivered tPA to 14% of all consults, while national data suggest that only 3% to 5% of patients with ischemic stroke receive tPA.

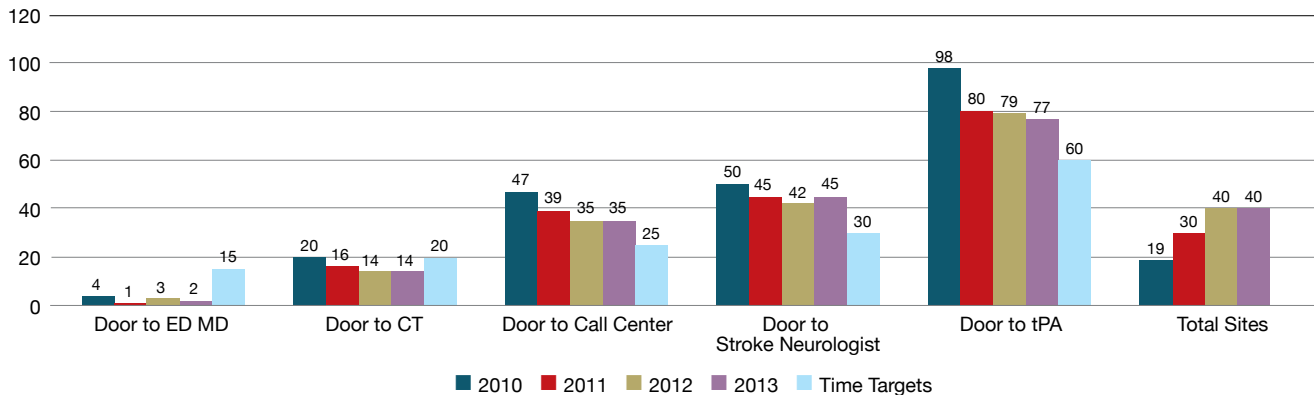


Just last year AR SAVES referrals went up **22%**, averaging the delivery of tPA to **29%** in 2013,

AR SAVES Code Stroke practices are based on the time targets of the national Get With The Guidelines published by the American Heart Association (2014). The time targets are based on full neurology supported Primary Stroke Center standards, but have been adjusted for rural hospitals to complete Door to Needle times in the same 60 minutes. Those standards include: Door to ED Physician Evaluation - 15

minutes, Door to CT and labs – 20 minutes, Door to SAVES Call Center – 25 minutes, Door to Stroke Neurologist Consult - 30 minutes, and Door tPA – 60 minutes.

AR SAVES and its partner sites have consistently lowered these target times while adding new sites each year, and exceeded the target times in two categories.

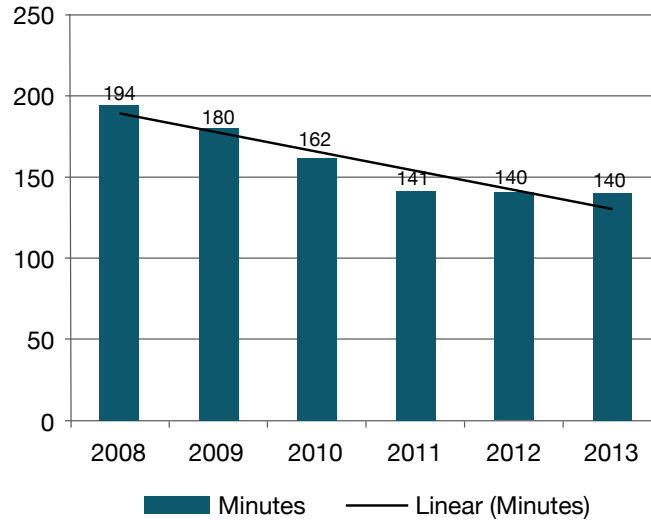


while national average is only **3% to 5%** of patients with ischemic stroke receive tPA

Within these 5 time targets, our Median Onset of Symptoms (Last Known Well Time) has been declining steadily as well. AR SAVES increase

of public education in reaching over 386,000 Arkansans is helping the recognition of the signs and symptoms of stroke leading to earlier treatment.

Median Onset of Symptoms to TPA



In a national article by the American Heart Association: Smith EE, Saver JL, Alexander DN, et al, *AHA/ASA Stroke Performance Oversight Committee. Clinical performance measures for adults hospitalized with acute ischemic stroke: performance measures for healthcare professionals from the American Heart Association/American Stroke Association*, published online ahead of print September 25, 2014. It was stated that Stroke severity is the strongest predictor

of death and disability following stroke, and is therefore required for adequate risk adjustment when comparing outcomes after stroke among institutions or providers. The hope is that endorsing the NIHSS as a performance measure may increase rates of its documentation, which are currently below 50%, even at Get With The Guidelines® institutions, and may ultimately permit reporting on outcomes after stroke.

100% of all **AR SAVES** sites are trained and utilizing the NIHSS as the scale of documentation for acute ischemic stroke

AR SAVES also assists our sites in fully meeting The Joint Commission Stroke Core Measures relating to acute ischemic stroke treatment in two areas. Core measure STK-4: Acute ischemic stroke patients who arrive at this hospital within 2 hours of time last known well and for whom IV t-PA was initiated at this hospital within 3 hours of time last

known well. Core Measure STK-8: 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.

When AR SAVES started in October 2008, tPA was administered to <1% of all ischemic stroke patients in Arkansas according to the Arkansas Department of Health. Arkansas was also ranked

highest in stroke mortality. A bivariate analysis of stroke patients hospitalized in AR SAVES vs non-AR SAVES hospitals showed the following statistical significance:

Table 3. Propensity score matched, post only, bivariate analysis of outcomes for stroke patients hospitalized in ARSAVES and non-ARSAVES hospitals.

	ARSAVES	Non-ARSAVES		
Number of Subjects	1,864	1,864		
Dichotomous Outcomes	%	%	Risk Ratio	95% CI
Stroke Related Mortality				
30 Day	6.2	10.5	0.59	0.38-0.81
6 Month	7.8	13.3	0.57	0.39-0.75
12 Month	9.1	14.5	0.45	0.44-0.81
Hospice	3.0	6.6	0.45	0.23-0.68
Medicaid Cost, Year Following Stroke in Dollars	1,988	2,480	-491	-933, -49

Bold indicates statistical significance at $p < 0.05$

Data came from the Arkansas Department of Health, Health Statistics Branch, Hospital Discharge Data Section, and the Arkansas Department of Human Services, Division of Medical Services, Medicaid Program.

Message from the Director



Team Arkansas

It's always nice to be a "first" in the state, but even better in the country. Arkansas should be proud of the acute stroke care it is providing through the AR SAVES program. There is no other state in the union matching

the coverage we have for our citizens at this time. Partnering with more than 40 hospitals and providing 24/7 neurology support through the Arkansas e-Link telehealth network has made this possible for our state to accomplish.

Our successes have been built on an evidence-based outcome clinical program and superior public outreach partnership that surpasses health care systems boundaries. You will see in the data section our numbers increase clinically, but even more, we reached more than 386,000 Arkansans with our outreach. It has always been our belief that we can train the best Emergency Department staff for stroke care, but as importantly we need to educate all individuals to recognize stroke and call 911. We will continue to build on this success by

providing extraordinary service through clinical training and continued, increased public outreach.

This year we will be focusing as well on the EMS providers throughout the state. This frontline defense in recognition of stroke can play a huge role in getting the patients to the appropriate care facility in the window of time for life-saving treatment. Through a partnership with the Arkansas Department of Health, many EMS providers and nurses will be certified in Advanced Stroke Life Support. This definitely is a natural progression to expand quality stroke care to the patients where they live. Our sites are excited to participate in this because they realize it is not only helping their care delivery, but the communities they serve.

The AR SAVES team of neurologists and staff are excited about the possibilities in FY 2015. Never in the history of Arkansas has this happened with stroke care, and we know records are always made to be broken. We continue to wake up every day and be a stronger team.

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

*Michael Manley, MNSc
AR SAVES Director
CDH Outreach Director*

From the Medical Director



This past year, the AR SAVES program has reached significant milestones in its development, and it is my pleasure to discuss this performance with you. Overall, the program has continued to grow, so that 99 percent of the Arkansas

population is within 60 minutes driving time to a stroke-ready hospital, and so that, when appropriate, every witnessed stroke should receive intravenous t-PA in the state of Arkansas.

We have grown in terms of the volume of consults as well as the percentage of consultations that received thrombolysis, and most importantly in the total patients that received t-PA. We have given this life-saving medication to more than 500 patients in five years of the program's life. This continued growth was due in part to the addition of new hospitals to the program, but also because of improved processes, education and awareness of stroke within the program along with its participation in communities.

Another key area of improvement is the fact that patients received t-PA faster after arriving at local hospitals. The so-called average door-to-needle time has steadily declined to 77 minutes, compared to 120 minutes when the program started. Small time improvements have occurred at all steps of the in-hospital phase, contributing to the shorter time to treatment. Some of our hospitals are consistently getting 60 minutes or better.

The stroke onset-to-treatment time reflects not only the in-hospital phase, but also the pre-hospital phase of stroke care. We were able to decrease this time significantly from 194 minutes to 140 minutes, most likely because of the improved awareness and stroke education in communities around the state. We also have encouraged the sites to improve their relationships with local emergency medical system agencies to help coordinate rapid and appropriate transport.

I cannot forget to mention the important contribution that our on-call stroke neurologists are making to AR SAVES. The time it is taking us to complete a consultation — including the interviewing

What's next for FY2015

and examining of patients with the help of local nurses — and guiding the safe administration of thrombolysis also has significantly decreased to less than 30 minutes.

In the future we will continue to strive for having even better numbers, targeting door-to-needle times of less than 60 minutes for all our patients.

AR SAVES is a close partner with the Arkansas Department of Health, contributing to the Arkansas Stroke Registry and to the AR Stroke Task Force to help delineate definitive stroke systems of care for the state.

I congratulate everybody within the AR SAVES family for these achievements, and I encourage everyone to keep working to improve the program. Sincerely,



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

- AR SAVES is pleased to announce the addition of two vascular neurologists to our team. Dr. Sami Harik and Dr. Sanjeeva Onteddu.



Harik



Onteddu

- The AR SAVES team will be providing a big push in education to the EMS providers of Arkansas. Working with our partner SAVES sites, we will be offering Advanced Stroke Life Support (ASLS) classes across the state to help better patient outcomes.
- We will also be assessing up to four more AR SAVES sites to become part of the team in FY 2015.
- This next year will show a growth in our AR SAVES presentations locally and nationally looking at programmatic and patient outcomes.



University of Arkansas for Medical Sciences
4301 W. Markham St., #518
Little Rock, AR 72205
arsaves.uams.edu