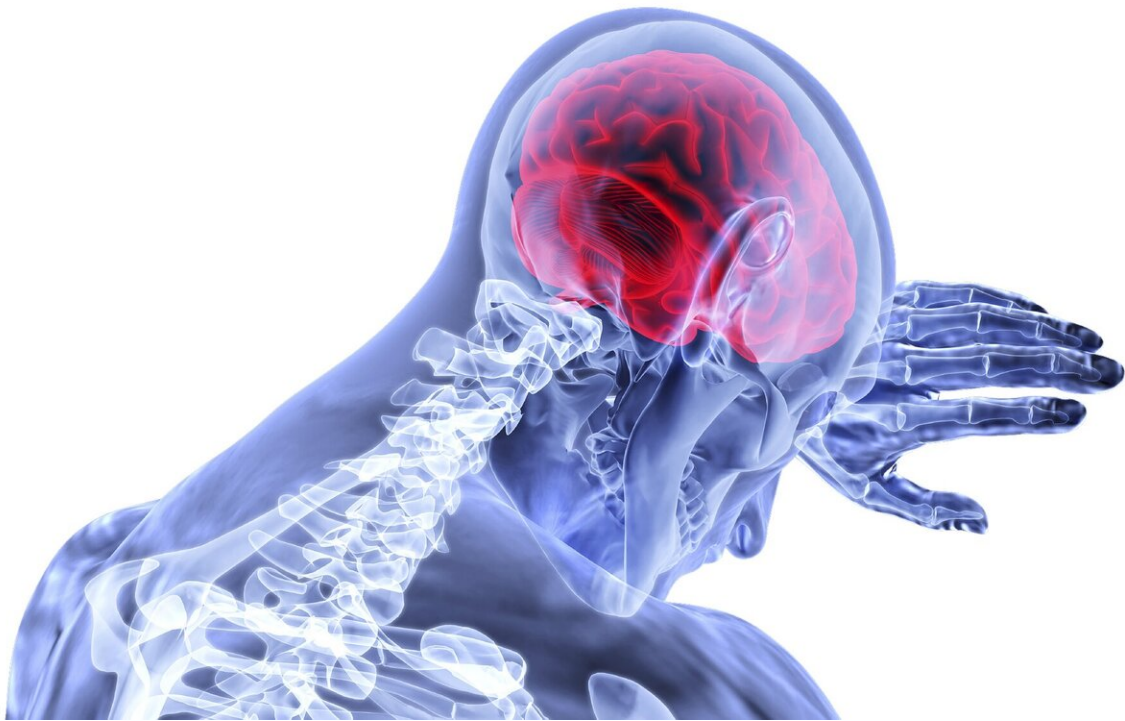


# Telestroke program prevents unnecessary hospital transfers, decreases rural healthcare disparities

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The U.S. Department of Veterans Affairs Veterans Health Administration (VHA) National Telestroke Program has made expert stroke care quickly available to patients, even at rural facilities with

limited staffing. A new study from the VA, Regenstrief Institute and Indiana University School of Medicine shows the telestroke program prevents unnecessary hospital transfers for stroke patients.

"This analysis suggests that telestroke provides additional benefits for both patients and [health systems](#)," said senior author Linda S. Williams, M.D., a VA researcher and a Regenstrief research scientist in Indianapolis. "It increases care efficiency and cost-effectiveness, while further optimizing care for the patient who does not have to endure an unnecessary or even counterproductive transfer to another facility."

The VHA National Telestroke Program provides acute stroke care at facilities that do not have a neurologist available. Through a mobile device, a neurologist from the central hub is able to evaluate the patients and provide a treatment plan for the on-site staff to carry out. Some patients can be treated at the community facility, while others need to be moved to a hospital with a higher level of care such as a comprehensive stroke care center. The neurologist from the central hub helps the on-site clinical team make that decision.

For this study, the researchers analyzed the number of patient transfers at 21 VHA facilities before and after the implementation of the telestroke program. They found the likelihood of being transferred to another facility decreased by 60 percent after the program's implementation. The program also increased the chance that the patient received timely acute stroke treatment (thrombolysis).

"The VHA telestroke program facilitates timely assessment of stroke and elevates the level of care at smaller facilities, eliminating the need for many transfers," said Dr. Williams. "This demonstrates another strategy to leverage telehealth in acute care settings while also reducing rural healthcare disparities."

The research is published online ahead of print in *Neurology*.

**More information:** Michael J. Lyerly et al, Impact of Telestroke Implementation on Emergency Department Transfer Rate, *Neurology* (2022). [DOI: 10.1212/WNL.0000000000200143](https://doi.org/10.1212/WNL.0000000000200143)

Provided by Regenstrief Institute

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