

## University of Louisville Stroke Symposium

**6/24/2016**

This activity was created to address the professional practice gaps listed below:

- Utilizing current best practices for neuroimaging of acute stroke.
- Recognizing the availability and appropriate use of telemedicine in stroke care.
- Identifying the differences and indications of the novel oral anticoagulants (NOACs).

**1. Please respond regarding how much you agree or disagree that the gaps listed above were addressed.**

	Disagree		Agree	
Participating in this educational activity changed your KNOWLEDGE in the professional practice gaps listed above. [44-3.80]	(1) 2.27%	(0)	(6) 13.64%	(37) 84.09%
Participating in this educational activity changed your COMPETENCE in the professional practice gaps listed above. [43-3.74]	(1) 2.33%	(0)	(8) 18.60%	(34) 79.07%
Do you feel participating in this educational activity will change your PERFORMANCE in the professional practice gaps listed above? [40-3.78]	(0)	(1) 2.50%	(7) 17.50%	(32) 80.00%

**2. Please elaborate on your previous answers. (19)**

n/a

for the subject of NOACs

good conference

increased utilization of brain perfusion scans. more involvement of neuro interventionalists

Good information.

Very detailed explanations.

as an RN I don't write orders, but as a leader in the stroke program I can certainly share the knowledge gained

This was a wonderful conference and very informative

Great conference

Great information!

I feel like the educational material that was shared gave me an extended knowledge of stroke as well as medications involved with stroke care

I will be able to better select a NOAC for my patients.

Good CME course for a non-neurologist, up to date, great speakers & good Q&A periods.

understanding current telemedicine technology and use  
 The stroke speakers had current, evidence based treatments to help change practice.  
 It was applicable to the condition of my wife.  
 Sequence of stroke evaluation

**3. Please evaluate the effectiveness of the following speakers in improving your knowledge, competence and/or performance. (Poor = 1, Excellent = 4)**

	Poor	Fair	Good	Excellent
Mark Alberts, MD [44-3.91]	(0)	(0)	(4) 9.09%	(40) 90.91%
Greg Albers, MD [44-3.91]	(0)	(0)	(4) 9.09%	(40) 90.91%
Robert James, MD, FAANS [44-3.82]	(0)	(1) 2.27%	(6) 13.64%	(37) 84.09%

**4. Please elaborate on your previous answers. (17)**

Good presentation  
 N/A  
 great talks updated  
 Great delivery.  
 Each speaker had good information and were able to deliver the message.  
 informative and engaging  
 The speakers were excellent  
 Great speakers  
 Very knowledgeable and pertinent to practice  
 All speakers were very enlightening  
 They were all excellent speakers.  
 Excellent authorities in their field of discipline, easy to understand and very unselfish in their responses.  
 I learned more about my wife's condition and the progress she has made was very predictable based on what they discussed.  
 Very prepared to talk about Stroke care

**5. Please identify a change that you will implement into practice as a result of attending this educational activity (new protocols, different medications, etc.) (30)**

Knowledge of treatment  
 Increase recommendation for NOAC use and decrease ASA use along with other anticoagulation RX  
 use of NOACs  
 Change in imaging for acute stroke  
 ask for the new meds for anticoags  
 more aware of research being done within our system. to keep up to date on what is new to pass on to staff.

more involvement of neuro interventionalists  
no asa with coumadin  
Longer sessions = 2 Days.  
The understanding of the treatment of strokes.  
change our iv tpa inclusion exclusion criteria. remove aPCC from our massive transfusion protocol  
I don't write orders, but will share the knowledge gained (I'm an RN)  
Utilize NOACS more often  
avoid using tpa in patients on novel anticoagulants identify pts who may benefit from intravascular intervention  
Using the NIHSS more frequently  
better knowledge of the NOACs  
Stronger belief in telemedicine, deeper understanding of CTP, and better use of NOACs  
more speakers geared toward nursing  
working towards The Joint Commission Stroke Certification  
New protocols  
Being aware of the new technology that is available and trying to get some of my physicans to understand that residents dont need to be on both coumadin and aspirin.  
imaging choice will adjust as well as referral pattern  
expanded use of NOACs  
Patient evaluation, confirmation of diagnosis & apply proper treatment modalities.  
use of stroke telemedicine  
knowledge base  
I will take what the speakers said and be able to follow up on the stroke patient.  
Be more familiar with how fast I need to work up stroke patients

## 6. How certain are you that you will implement this change?

(40)

Certain <sup>(21-</sup>  
52.50%)

Very Certain <sup>(15-</sup>  
37.50%)

Maybe <sup>(1-</sup>  
2.50%)

N/A <sup>(3-</sup>  
7.50%)

## 7. What topics do you want to hear more about, and what issues(s) in your practice will they address? (25)

Childhood strokes

ELVO and results regarding identification early in the field and appropriate triage.

use and issues with NOACs

addressing bleeds on non coumadin agents

How different type of stroke pt's recover and their reoccurrence with having another strokes

more about how the EMS services can help with getting the patients to the right facility and how they can help start treatment prior to hitting the hospital door.

imaging

n/a

Heart Health Dissabiliites

Obesity Addiction

other potential uses of telemedicine in an outpatient type setting

telemedicine, successful models, meeting metrics, etc. just starting telemed program for stroke

strategies to use to care for patients with hypertensvie brain bleeds

post acute care resources for stroke patients

Stroke care

Strokes

Stroke protocols and processes

I would like to see future symposiums have more educational presentations related to nursing and care across the continuum

advance treatment

inventional vascular procedures

hypercoagulable conditions and how best to treat them to reduce the risk of stroke

I am very interested in the intravascular treatment modalities of stroke (embolic) because I am an anesthesiologist.

movement disorders, update in psychiatry for neurologists

Inter-vascular treatment of embolic stroke.

NIH criteria and the new medications in treatment of strkes

**8. Were the patient recommendations based on acceptable practices in medicine?**

**(43)**

Yes <sup>(43-</sup>  
100.00%)

**9. If you answered No on the question above, please explain which recommendation(s) were not based on acceptable practices in medicine? (3)**

n/a

**10. Do you think the presentation was without commercial bias?**

**(42)**

Yes <sup>(42-</sup>  
100.00%)

**11. If you answered No on the above question, please list the topics that were biased? (3)**

n/a

**12. Please provide any additional comments you may have about this educational activity. (17)**

Great Educational Conference

thank you for arranging this good symposium

very good

very informative

Handouts should always be made available

Handouts should have been provided-always.

Thanks.

Very informative and helpful.

Good program. good speakers.

n/a

Enjoyed speakers comprehensive knowledge and experiences

Thanks again! Great conference

I look forward to what this symposium has to bring in the future

I attended this CME because my wife had a stroke and she was treated at the Norton Hospital-Brownsboro Stroke Unit. They did a very good job. She is also doing very well.

I would like to be included on your mailing list for future stroke conferences.

Very informative morning and faculty selected was excellent

As one of the participants of this educational activity, we want to encourage you to implement those ideas that were appropriate to your healthcare environment.

This evaluation is confidential and no individual will be identified by this office (Continuing Medical Education and Professional Development). It will only be used for quality improvement.

We look forward to seeing you at future University of Louisville events. Thank you very much.

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