



Evaluation of Telestroke: Relevant Questions / Information Required

Process Evaluation

1. Time of onset of signs and symptoms

Date _____ Time _____

2. Time of patient arrival at the Emergency Department

3. Time of the call to initiate telestroke videoconference

4. Were you (the neurologist) able to successfully connect and complete the consultation via videoconference to/with the referring site?

Yes No

5. If no, why not? (please identify the key reason(s))

_____ Technical problems at referring site

_____ Technical problems at consulting site

_____ Network not operating

_____ Lack of technical documentation/help desk at consulting and/or referral site

_____ Other (please identify) _____

6. Was tPA given to the patient?

Yes No

7. If yes, time when tPA started

8. If no, why not? (please identify the key reason(s))

_____ Diagnosis other than stroke

_____ Clinical contraindication(s)

_____ tPA could not be administered within the 4.5 hour window

_____ Other (please identify) _____

Provider Evaluation (To be completed by both the local physician and the consulting neurologist)

9. Did the telestroke consultation result in changes or additions to the patient's management?

Yes No

If yes, please explain _____

10. Please rank the degree to which the telestroke consultation assisted in the medical management of this patient:

Not at all 1 2 3 4 5 6 7 Significantly

11. In your opinion, how important was it that this patient receive a telestroke consultation?

Not important 1 2 3 4 5 6 7 Very important

Patient Evaluation (Local physician to ask the patient)

12. Was your experience with the telestroke consultation satisfactory?

Yes No

Other Comments

