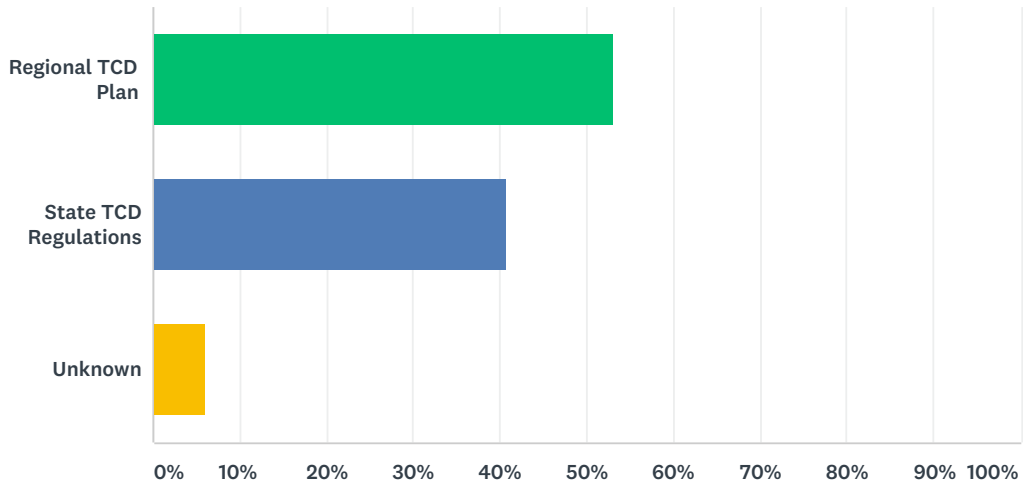


Q1 Does your EMS agency use a regional TCD plan or state TCD regulations to govern the routing of STEMI, Stroke and Trauma patients?

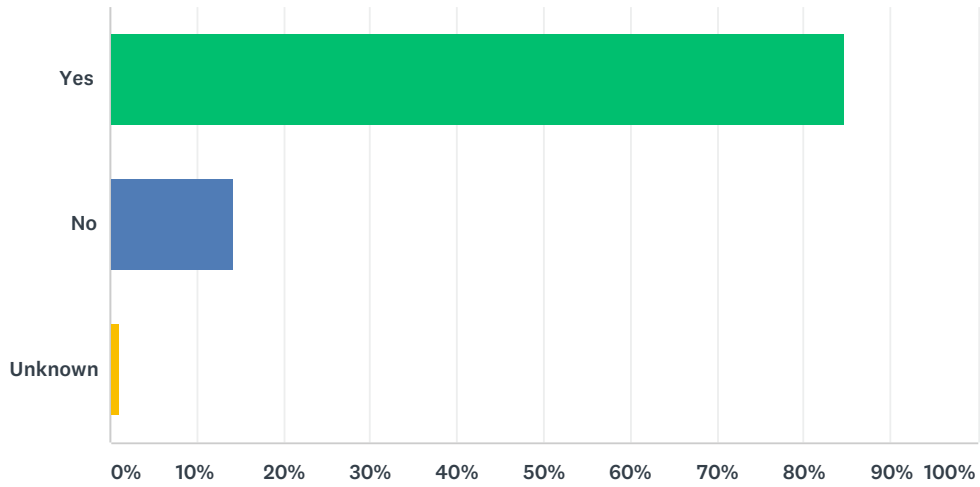
Answered: 98 Skipped: 0



ANSWER CHOICES	RESPONSES	
Regional TCD Plan	53.06%	52
State TCD Regulations	40.82%	40
Unknown	6.12%	6
TOTAL		98

Q2 Does your agency get feedback on patient outcomes from hospitals regarding these patients?

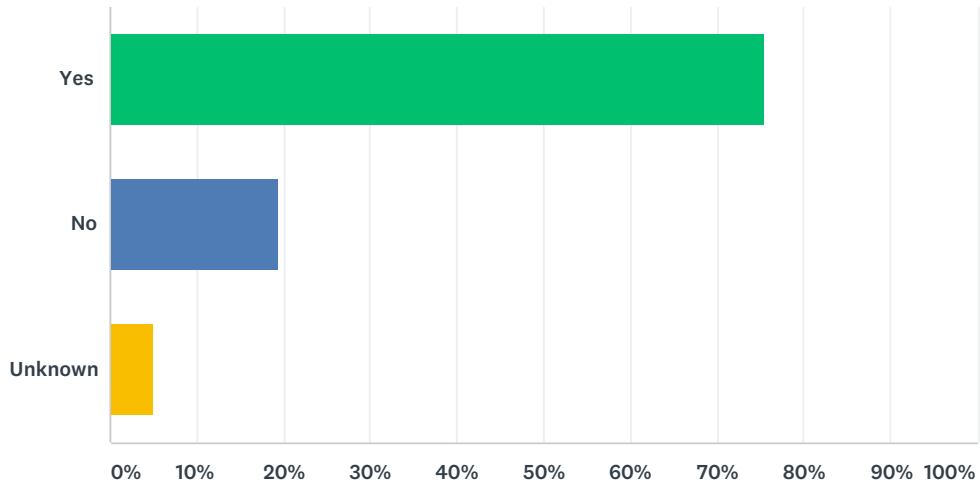
Answered: 98 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	84.69%	83
No	14.29%	14
Unknown	1.02%	1
TOTAL		98

Q3 Does your agency participate in local or regional meetings about the TCD system?

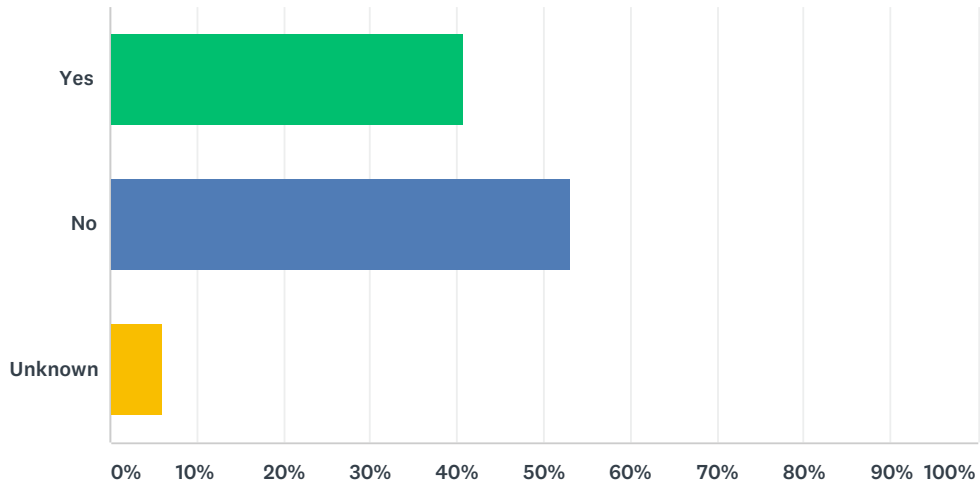
Answered: 98 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	75.51%	74
No	19.39%	19
Unknown	5.10%	5
TOTAL		98

Q4 Does your agency participate in local or regional meetings about individual patient outcomes?

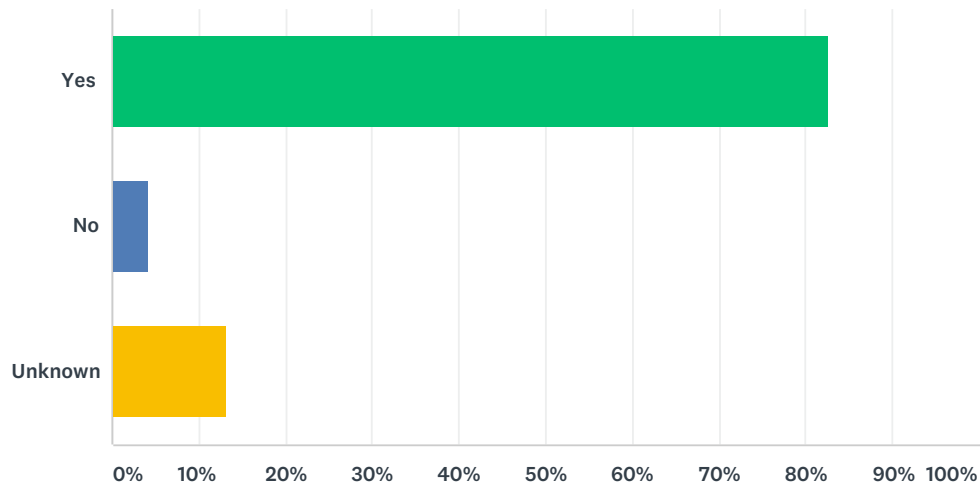
Answered: 98 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	40.82%	40
No	53.06%	52
Unknown	6.12%	6
TOTAL		98

Q5 Does the routing of patients to STEMI, Stroke or Trauma centers lead to improved patient outcomes?

Answered: 98 Skipped: 0



ANSWER CHOICES	RESPONSES	
Yes	82.65%	81
No	4.08%	4
Unknown	13.27%	13
TOTAL		98

#	COMMENTS	DATE
1	Well rehearsed symphony, consistent level of care and communication	10/15/2018 3:09 PM
2	It would be nice if all hospitals would give agencies feedback on patient outcome without having the hospital computer system.	10/12/2018 11:01 AM
3	We don't get any feedback from those specialty centers.	10/10/2018 1:56 PM
4	The patient receives the right treatment in a shorter amount of time. Unnecessary transfers the waste of time is reduced, by patients being routed to the right hospital instead of the community hospital.	10/9/2018 6:15 PM
5	We use the state plan due to the region committee wants all pt's to go to...	10/9/2018 12:29 PM
6	Our region is too diverse for one plan to adequately govern what is best for patients in our District. We see what the TCD plan wants actually go against what is best for the patient all to often.	10/9/2018 9:59 AM
7	inconsistent availability and inaccurate capabilities have sometimes led to less than optimal outcomes at times but overall TCD has improved patient outcomes. Smaller hospitals wanting to take a piece of the TCD pie delay care by confusing stop gap treatments with definitive care. We should be encouraging rapid transport to appropriate centers.	10/8/2018 8:52 PM
8	We have yet to see any data from a state TCD system/data base.	10/8/2018 2:41 PM
9	Rural agencies are still not utilizing air enough. Many feel they can transport any TCD Patients on their own to the closest hospital. They recognize there is no penalty if they don't.	10/8/2018 2:37 PM
10	Yes in most cases, not sure when the last known well stroke patients are several hours past the window.	10/8/2018 2:12 PM

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11	Closest hospitals bring their STEMI patients to our hospital by EMS transfers because of the ability to take care of STEMI's.	10/8/2018 1:57 PM
12	Many won't activate off EMS request so delay negates the benefits	10/8/2018 12:57 PM
13	All EMS agencies are not regularly participating in regional meetings	10/8/2018 12:36 PM
14	Due to specific geography, sometimes following the letter of the law and going to a Level III center that is technically closer (by a margin of 10-15 minutes) versus going to a Level II or I center seems to be of detriment to the patient versus bypassing and going directly to the definitive care.	10/8/2018 12:34 PM
15	The TCD system has improved patient outcomes. As the system matured it has become more effective over the years.	10/8/2018 11:22 AM
16	Rural stroke 3 centers too often try to receive patients who are beyond their capabilities. There needs to be language to protect EMS for bypassing to get to a two or one level.	10/8/2018 10:53 AM
17	We get feedback, but we are unable to determine if another hospital would of provided same level or better care. We get sporadic feedback on STEMI and Stroke patients, but no feedback on Trauma patients.	10/8/2018 10:52 AM
18	Higher Level centers are MUCH more prepared to handle these patients and give much better feedback	10/8/2018 10:37 AM
19	Absolutely. And TCD is a huge piece in guiding folks to the most appropriate facilities.	10/8/2018 10:33 AM
20	We are just minutes from multiple level 1 trauma centers, PCI capable centers and comprehensive stroke centers. Our patients don't go to other facilities for us to see if the specialty centers have better outcomes than the others. I would assume they do but I don't have that data.	10/8/2018 10:31 AM

Q6 What electronic patient care reporting system does your agency use?

Answered: 96 Skipped: 2

#	RESPONSES	DATE
1	ESO	10/16/2018 2:59 PM
2	ESO	10/16/2018 11:50 AM
3	Image Trend	10/15/2018 8:12 PM
4	Image Trend Elite	10/15/2018 6:46 PM
5	ESO	10/15/2018 3:09 PM
6	MARS	10/15/2018 10:02 AM
7	ESO	10/15/2018 4:25 AM
8	ImageTrend	10/14/2018 12:50 PM
9	Image Trend Elite	10/14/2018 10:54 AM
10	MEDS	10/13/2018 2:49 PM
11	Image trend	10/13/2018 10:53 AM
12	Firehouse	10/12/2018 3:02 PM
13	ImageTrend	10/12/2018 11:01 AM
14	Imagetrend	10/12/2018 8:55 AM
15	n/a	10/12/2018 7:39 AM
16	MARS	10/12/2018 7:32 AM
17	ImageTrend Elite	10/11/2018 5:07 PM
18	EPIC	10/11/2018 2:47 PM
19	Zoll	10/11/2018 2:44 PM
20	Zoll	10/10/2018 5:37 PM
21	ESO	10/10/2018 1:56 PM
22	Image trend elite	10/10/2018 1:25 PM
23	AmbuPro	10/10/2018 11:42 AM
24	Meditech	10/10/2018 11:41 AM
25	Going to ESO, HealthEMS now	10/10/2018 10:30 AM
26	ESO	10/10/2018 8:33 AM
27	Image Trend Elite	10/9/2018 6:15 PM
28	Aim-Ram	10/9/2018 3:48 PM
29	AIM Online	10/9/2018 1:27 PM
30	Mobile Health EMS	10/9/2018 1:08 PM
31	XchangeER	10/9/2018 12:42 PM
32	ESO	10/9/2018 12:42 PM
33	ESO	10/9/2018 12:29 PM
34	ESO	10/9/2018 12:17 PM
35	Image Trend	10/9/2018 12:00 PM

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36	Image Trend Elite	10/9/2018 11:54 AM
37	ESO	10/9/2018 11:02 AM
38	ESO	10/9/2018 9:59 AM
39	Currently HealthEMS but transitioning to ESO	10/9/2018 9:48 AM
40	AIM	10/9/2018 9:05 AM
41	Intermedix	10/9/2018 7:55 AM
42	ESO	10/9/2018 7:53 AM
43	Eso	10/8/2018 10:40 PM
44	Image Trend	10/8/2018 8:52 PM
45	Imagetrend State Bridge	10/8/2018 8:31 PM
46	ESO	10/8/2018 7:45 PM
47	ESO	10/8/2018 5:53 PM
48	mars	10/8/2018 4:45 PM
49	ImageTrend	10/8/2018 3:45 PM
50	Image Trend	10/8/2018 3:32 PM
51	Cerner	10/8/2018 3:19 PM
52	Ambupro	10/8/2018 2:56 PM
53	ImageTrend	10/8/2018 2:46 PM
54	Imagetrend	10/8/2018 2:37 PM
55	Zoll Data	10/8/2018 2:23 PM
56	ESO	10/8/2018 2:12 PM
57	Image Trend Field Bridge	10/8/2018 2:08 PM
58	EPIC	10/8/2018 1:57 PM
59	ESO, Code Red and Image Trend	10/8/2018 1:50 PM
60	ESO	10/8/2018 1:34 PM
61	Image Trend	10/8/2018 1:17 PM
62	ImageTrend	10/8/2018 1:17 PM
63	Image Trend	10/8/2018 1:03 PM
64	Imagetrend	10/8/2018 12:57 PM
65	ESO	10/8/2018 12:39 PM
66	unknown	10/8/2018 12:36 PM
67	ESO	10/8/2018 12:34 PM
68	AmbuPro EMS	10/8/2018 12:30 PM
69	Beyond Lucid Technologies	10/8/2018 12:17 PM
70	AmbuPro	10/8/2018 11:45 AM
71	ESO	10/8/2018 11:42 AM
72	mars	10/8/2018 11:36 AM
73	MEDS4	10/8/2018 11:31 AM
74	Health EMS	10/8/2018 11:22 AM
75	ESO	10/8/2018 11:14 AM
76	ESO	10/8/2018 11:10 AM

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77	ImageTrend Elite	10/8/2018 11:06 AM
78	Missouri Ambulance Reporting System	10/8/2018 11:05 AM
79	ESO	10/8/2018 10:53 AM
80	Imagetrend	10/8/2018 10:52 AM
81	iPCR	10/8/2018 10:50 AM
82	Sansio HealthEMS	10/8/2018 10:47 AM
83	HealthEMS	10/8/2018 10:43 AM
84	ESOsolutions	10/8/2018 10:41 AM
85	State Free Bridge Image Trend	10/8/2018 10:37 AM
86	zoll	10/8/2018 10:33 AM
87	ESO	10/8/2018 10:31 AM
88	Code red	10/8/2018 10:29 AM
89	?	10/8/2018 10:29 AM
90	ImageTrend	10/8/2018 10:28 AM
91	Image trend	10/8/2018 10:21 AM
92	Image Trend	10/8/2018 10:08 AM
93	NCDR	10/8/2018 10:07 AM
94	Image Trend	10/8/2018 10:05 AM
95	ESO	10/8/2018 9:56 AM
96	EPIC	10/8/2018 9:45 AM

Q7 How does your agency submit data to the Department of Health, Bureau of EMS?

Answered: 90 Skipped: 8

#	RESPONSES	DATE
1	It's automatic with the PT reporting program.	10/16/2018 2:59 PM
2	Life Threats only	10/16/2018 11:50 AM
3	Electronically	10/15/2018 8:12 PM
4	Electronically	10/15/2018 6:46 PM
5	Yes, NEMSIS	10/15/2018 3:09 PM
6	Electronic	10/15/2018 10:02 AM
7	MARS	10/15/2018 4:25 AM
8	Yes	10/14/2018 12:50 PM
9	N/A	10/14/2018 10:54 AM
10	MARS	10/13/2018 2:49 PM
11	Image trend electronically	10/13/2018 10:53 AM
12	State Website	10/12/2018 3:02 PM
13	ImageTrend	10/12/2018 11:01 AM
14	MARS	10/12/2018 8:55 AM
15	na/	10/12/2018 7:39 AM
16	MARS	10/12/2018 7:32 AM
17	Electronically	10/11/2018 5:07 PM
18	Unknown	10/11/2018 2:47 PM
19	We try to	10/11/2018 2:44 PM
20	Through secure server	10/10/2018 5:37 PM
21	Electronic	10/10/2018 1:56 PM
22	image trend	10/10/2018 1:25 PM
23	Electronically	10/10/2018 11:42 AM
24	Submitted data	10/10/2018 11:41 AM
25	Electronically	10/10/2018 10:30 AM
26	through ESO	10/10/2018 8:33 AM
27	PCR	10/9/2018 6:15 PM
28	Electronically	10/9/2018 3:48 PM
29	Yes	10/9/2018 1:27 PM
30	Electronically IDPH Illinois	10/9/2018 1:08 PM
31	computer	10/9/2018 12:42 PM
32	electronically	10/9/2018 12:29 PM
33	ESO electronic	10/9/2018 12:17 PM
34	I don't believe we do	10/9/2018 12:00 PM

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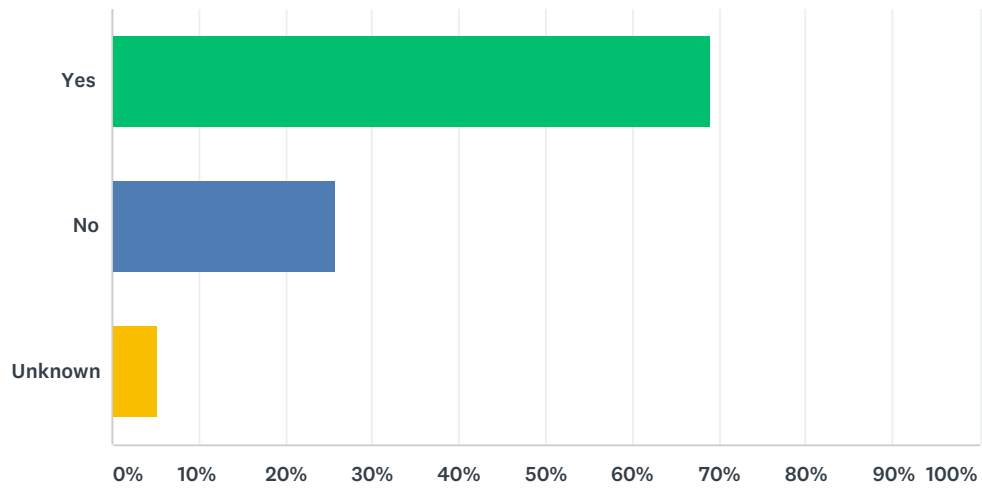
35	electronically if requested (Elite not supported on Mo state bridge)	10/9/2018 11:54 AM
36	Electronic	10/9/2018 11:02 AM
37	Extract from ESO	10/9/2018 9:59 AM
38	Electronically	10/9/2018 9:48 AM
39	Electronic	10/9/2018 9:05 AM
40	Intermedix	10/9/2018 7:55 AM
41	Data Upload	10/9/2018 7:53 AM
42	yes	10/8/2018 10:40 PM
43	It doesn't directly	10/8/2018 8:52 PM
44	State Bridge EMS system	10/8/2018 8:31 PM
45	Through ESO's electronic submission system	10/8/2018 7:45 PM
46	ESO automatic transmission to the State	10/8/2018 5:53 PM
47	YES	10/8/2018 4:45 PM
48	Electronic	10/8/2018 3:45 PM
49	Unsure	10/8/2018 2:56 PM
50	NEMESIS	10/8/2018 2:46 PM
51	Electronic	10/8/2018 2:37 PM
52	Extract and upload	10/8/2018 2:23 PM
53	Yes through ESO	10/8/2018 2:12 PM
54	Through Image Trend- MARS	10/8/2018 2:08 PM
55	NCDR	10/8/2018 1:57 PM
56	Electronically	10/8/2018 1:34 PM
57	Image Trend Data Post	10/8/2018 1:17 PM
58	ImageTrend Data Post	10/8/2018 1:17 PM
59	Image Trend	10/8/2018 1:03 PM
60	Mars	10/8/2018 12:57 PM
61	Electronically	10/8/2018 12:39 PM
62	ESO	10/8/2018 12:34 PM
63	Weekly I am told	10/8/2018 12:30 PM
64	Through our reporting software	10/8/2018 12:17 PM
65	XML File Electronically	10/8/2018 11:45 AM
66	Uploaded to their registry	10/8/2018 11:42 AM
67	upload	10/8/2018 11:36 AM
68	Yes	10/8/2018 11:22 AM
69	ESO	10/8/2018 11:14 AM
70	ESO Does	10/8/2018 11:10 AM
71	Paper, electronic	10/8/2018 11:06 AM
72	Missouri Ambulance Reporting System	10/8/2018 11:05 AM
73	Electronically when the state upgrades	10/8/2018 10:53 AM
74	Automatically via Imagetrend	10/8/2018 10:52 AM
75	ImageTrend	10/8/2018 10:50 AM

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76	Weekly upload	10/8/2018 10:47 AM
77	Tritech	10/8/2018 10:43 AM
78	Image Trend upload	10/8/2018 10:41 AM
79	Image Trend	10/8/2018 10:37 AM
80	zoll - automatically submits	10/8/2018 10:33 AM
81	electronic interface	10/8/2018 10:31 AM
82	Upload through code red	10/8/2018 10:29 AM
83	?	10/8/2018 10:29 AM
84	Unable to due to incompatability with BEMS & ImageTrend Elite. We have been waiting for the State to fix the server issue for over 18 months.	10/8/2018 10:28 AM
85	Electronically	10/8/2018 10:21 AM
86	Yes	10/8/2018 10:08 AM
87	Data is uploaded from NCDR	10/8/2018 10:07 AM
88	electronically	10/8/2018 10:05 AM
89	ESO Submits	10/8/2018 9:56 AM
90	public reporting	10/8/2018 9:45 AM

Q8 Do your patient care reports get electronically submitted to the STEMI, Stroke or Trauma center?

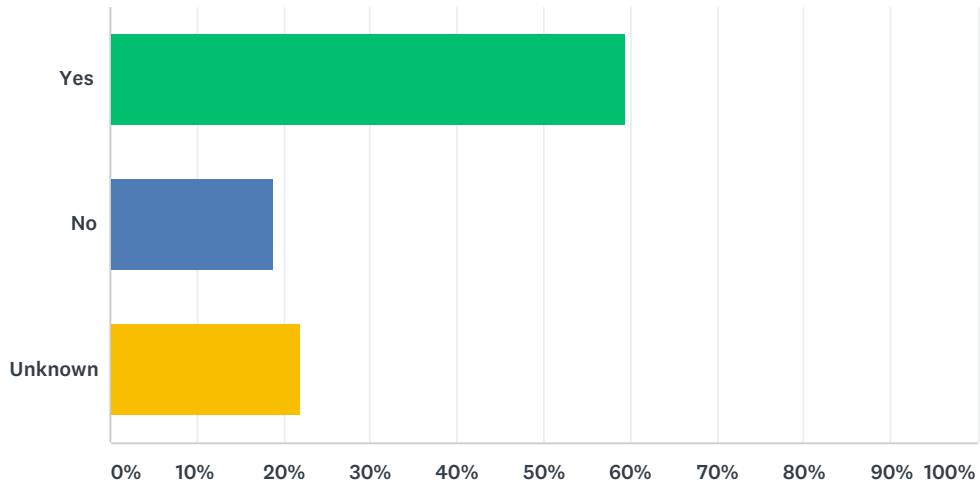
Answered: 97 Skipped: 1



ANSWER CHOICES	RESPONSES	
Yes	69.07%	67
No	25.77%	25
Unknown	5.15%	5
TOTAL		97

Q9 Should EMS Regional Councils be given more responsibility to evaluate patient care provided by the TCD system?

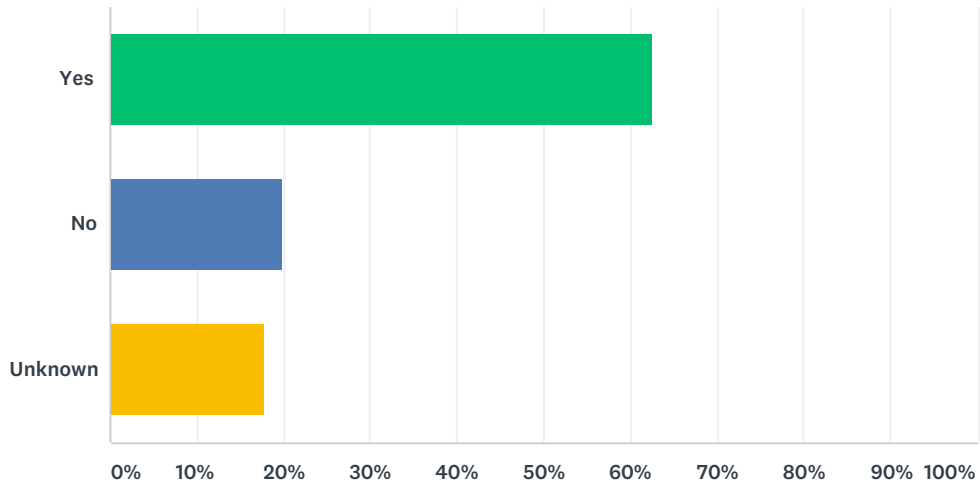
Answered: 96 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	59.38%	57
No	18.75%	18
Unknown	21.88%	21
TOTAL		96

Q10 Should EMS Regional Councils be given more authority for planning regarding TCD?

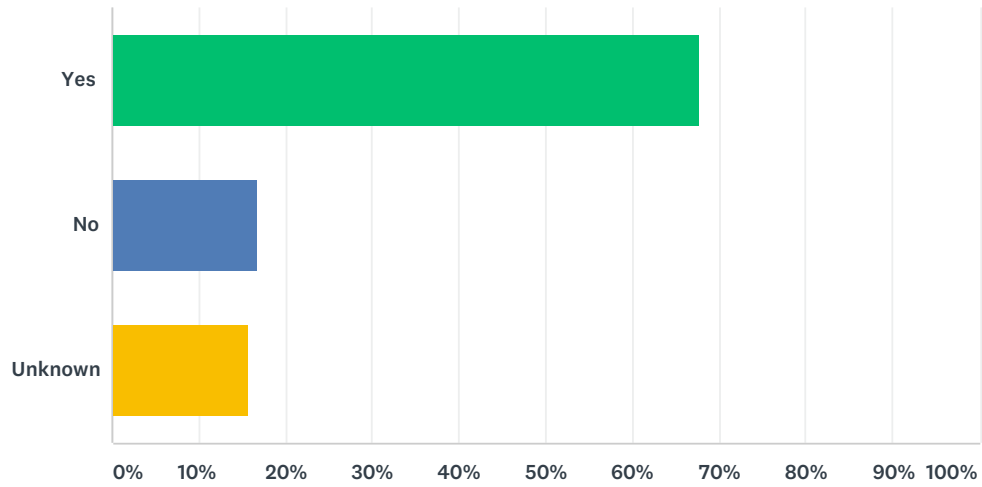
Answered: 96 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	62.50%	60
No	19.79%	19
Unknown	17.71%	17
TOTAL		96

Q11 Is your agency a member of a Patient Safety Organization (PSO)?

Answered: 96 Skipped: 2



ANSWER CHOICES	RESPONSES	
Yes	67.71%	65
No	16.67%	16
Unknown	15.63%	15
TOTAL		96

Q12 What could be done to improve the TCD system?

Answered: 66 Skipped: 32

#	RESPONSES	DATE
1	Provide a permanent funding source.	10/16/2018 2:59 PM
2	Publicly disclose information. Patients ultimately have the choice of what hospital they want to go to. TCD doesn't mean anything to the general public and they want to go to the hospital that they like.	10/15/2018 6:46 PM
3	Program oversight	10/15/2018 3:09 PM
4	Provide for feedback on patient outcomes. Also set and enforce rules on failure to comply with TCD transports rather it be a hospital or ambulance service.	10/15/2018 4:25 AM
5	Local Non TCD centers as well as citizens within the community need to be better informed on the laws governing TCD as well as the criteria required for transport to TCD centers.	10/14/2018 10:54 AM
6	More regional control.	10/12/2018 3:02 PM
7	Allow attending Paramedic's to make more decisions on the appropriate facility, so the patient will not need transferred 20 minutes later. IE: Stroke patient who is having a suspected bleed vs. clot. Closer Trauma Center status without mileage limitations.	10/12/2018 11:01 AM
8	The Governor not vetoing funding for state TCD oversight would have been a great start.	10/12/2018 8:55 AM
9	Allow hospitals access to MARS to retrieve patient care reports rather than waiting for the service to fax a PCR.	10/12/2018 7:32 AM
10	Allowing more EMS input into the plan, less focus on in-hospital requests.	10/11/2018 5:07 PM
11	Clarity and updated regulations	10/11/2018 2:47 PM
12	Increasing minimum levels of EMS involvement on regional EMS committees. Streamlining processes to put regional TCD plans into place	10/11/2018 2:44 PM
13	Allocate 20 million into system development at the state level	10/11/2018 12:22 PM
14	Na	10/10/2018 5:37 PM
15	Provide funding, and ensure feedback fro the specialty centers	10/10/2018 1:56 PM
16	Don't mess with it.	10/10/2018 11:42 AM
17	Clarify diversions, make them more strict, or get rid of any diversions. It upsets patients, delays care anyway, and the ED will need to learn to take care of pts with fewer providers at a time.	10/10/2018 10:30 AM
18	Standardized system in which patient outcomes can be seen by the agencies to include the field staff. It would be nice to know outcomes on patients that turn into a STEMI or Stroke once they are at the hospital also.	10/10/2018 8:33 AM
19	I think the system is great and helps EMS services and their patients make the right transport decisions. Patients benefit from he system by getting the help and treatment needed in a timely manner and without interruption of transfers and other not having the right equipment to treat the patient. Unnecessary charges for ER visits and transfers are also alleviated due to the patient being transported to the right facility at the right time.	10/9/2018 6:15 PM
20	Expand TCD to include non TCD rated hospitals with time requirements in transferring patients to TCD facilities.	10/9/2018 3:48 PM
21	I believe everything seems to be adequate, as long as the EMS Services go to the meetings, inform their Crews of changes, update Protocols and have an effective internal QA, QI programs.	10/9/2018 1:27 PM
22	Unknown	10/9/2018 12:42 PM
23	A more consistent standard throughout. Early activation, and a regionalized approach.	10/9/2018 12:42 PM
24	quit trying to allow hospitals to run EMS	10/9/2018 12:29 PM

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25	Ensure EMS is at the table at the region level and they are listened to openly. The specialist should be used as a tool for EMS to set regional protocols.	10/9/2018 12:17 PM
26	State and Regional benchmark reporting.	10/9/2018 12:00 PM
27	Better dissemination of TCD info to area providers (Primary care providers, Nursing home administrators, ER physicians at non-designated facilities, and the general public).	10/9/2018 11:54 AM
28	Fund it, keep it organized and up to date, set on-going system review dates to ensure its meeting the needs of the communities served. I see value in simplifying the certifications for hospitals so that each is either a TCD Center or their not. In other words, to be a TCD Center you have to accept stroke, STEMI, and trauma patients. Then have Level 1, 2, or 3 TCD Centers. Make it easier on Paramedics in the field so they can easily identify where patients should be taken at a moments notice. Stop the "Facility Diversion Statuses" statewide, it is complicating the intended TCD destination status.	10/9/2018 11:02 AM
29	Increased plan flexibility for specific areas / Districts. Regions are too Diverse for a one size fits all plan.	10/9/2018 9:59 AM
30	Establish processes and plans to sustain the TCD system into perpetuity	10/9/2018 9:48 AM
31	Define TCD centers and publish accurate capabilities. Ensure public is informed. Utilize all available resources - Air - Ground etc without insurance companies punishing providers for taking patients to centers with widely acknowledged capabilities when a lesser facility is closer just because they advertise that they can treat a stroke.	10/8/2018 8:52 PM
32	Stop allowing regional hospital physicians to intervene in TCD decisions. Patients picked up at nursing homes will sometimes come with verbal orders from a physician to take them to the local hospital despite obvious signs of stroke or STEMI. Doctors orders are trumping TCD criteria when the patient requires more advanced care.	10/8/2018 8:31 PM
33	Better unified data collection and review process.	10/8/2018 5:53 PM
34	REMOVE IT. IT DOES NOT WORK IN SUPER RURAL AREAS WHERE THE CLOSEST DESIGNATED CENTER IS 140 MILES AWAY. TRANSPORT TO THE CLOSEST FACILITY FOR STABILIZATION IS MORE APPROPRIATE.	10/8/2018 4:45 PM
35	Better enforcement of the guidelines and utilization of resources to ensure patients are receiving the best care and outcomes possible.	10/8/2018 3:45 PM
36	Stop making smaller centers transfer to centers within their "system". It should strictly be closest most appropriate. Not closest most appropriate within the ... system	10/8/2018 3:32 PM
37	Get the review process for TCD centers more timely and organized and hold EMS accountable if expectations are not being met.	10/8/2018 2:41 PM
38	Enforcement. Some agencies have protocols that require transport, but don't follow them.	10/8/2018 2:37 PM
39	More EMS agency data participation	10/8/2018 2:23 PM
40	Define Prolonged Transport time.	10/8/2018 2:12 PM
41	We get feedback on the Strokes and STEMI's but no feedback on trauma's. Need this feedback to better improve our skills. Some of the hospitals need access to the MARS for reports. Many times they call needing reports faxed because they cannot get to them.	10/8/2018 2:08 PM
42	Nothing that I can think of.	10/8/2018 1:57 PM
43	Better Funding	10/8/2018 1:17 PM
44	Better funding	10/8/2018 1:17 PM
45	Take the mileage requirement out of the Level 3 Trauma Center guidelines. If there are able to meet the requirements of a level 3 trauma center, why does it matter how close they are to level 2 or 3 trauma centers?	10/8/2018 1:03 PM
46	Work with hospitals to trust prealerts and be ready.	10/8/2018 12:57 PM
47	Ensure all participating agencies are providing similar care with the ability to pool data to improve patient outcomes	10/8/2018 12:39 PM
48	More authority and autonomy at the regional level	10/8/2018 12:36 PM

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49	Better funding. Making all hospitals have some level of accreditation so that it is more transparent to know what each facility's actual capabilities are. Make it easier for us to get data back out of the system.	10/8/2018 12:34 PM
50	Keep the politicians out of it (oh that's to late). Let it be dictated by local protocol and not State protocol. MARC has an excellent TCD in place, leave it alone.	10/8/2018 12:17 PM
51	Include all hospitals in the system. Each hospital that has a ER, walk in clinics and emerge centers need to be included in the regional and state plans to get TCD patient in the system. Right Patient, Right place, the first time.	10/8/2018 11:22 AM
52	unknown	10/8/2018 11:10 AM
53	Better clarification as to when a providers findings indicate a more serious illness are they able to bypass (say a Level 3 stroke center for a Level 1 or 2 only 5 miles farther) rather than prolong the definitave care the patient actually needs.	10/8/2018 11:06 AM
54	Fund it properly.	10/8/2018 11:05 AM
55	See above!	10/8/2018 10:53 AM
56	More funding and legislative support would be a good start to improving the system. It would also be nice if the Bureau of EMS wouldn't threaten investigations of agencies if they chose to take patient elsewhere, as we are always looking to do what is in the best interest of the patient. The TCD system could also be designed to ensure EMS providers obtain feedback on all patients entered into the system from their agencies. Feedback is important to the QA process and would ultimately improve patient care over the long term.	10/8/2018 10:52 AM
57	Take the politics out of the process	10/8/2018 10:50 AM
58	More participation in regional meetings from smaller EMS agencies and non-TCD hospitals.	10/8/2018 10:47 AM
59	Keep the system funded so that all 3 TCD functions can flow info. Also require TCD centers to provide electronic not manual feedback regarding patient outcomes.	10/8/2018 10:41 AM
60	Clearer guidelines.	10/8/2018 10:37 AM
61	Add sepsis	10/8/2018 10:31 AM
62	Start from scratch and learn from the mistakes. Have a recommendations vs. Regulations better to change with the changing guidelines for treatment. The regulations have been proven to hinder progress. Annual review of recommendations and use the leading authorities in the field of Stroke , STEMI and Trauma to drive process improvement and dictate treatments. You have legislators holding up the processes that they know nothing about. Assign Medical professionals not elected politicians to be the gate keepers of the TCD system	10/8/2018 10:29 AM
63	A Regional approach for our service area is ineffective, and a Local approach is working, and has worked, well. Our service area is in the Central Region, but our closest STEMI & Stroke center is in the East Central Region. We have worked well with them since the inception of TCD. I understand that a Regional approach works well in some areas, but will only pose a challenge for our service. It makes no sense to be bound to a Regional protocol when we don't transport to a hospital in that region.	10/8/2018 10:28 AM
64	Provide better funding and more consistent oversight of participating hospitals for compliance to regulations and standards of care. Keep political agendas and politicians OUT of it!	10/8/2018 10:07 AM
65	system working effectively in our region.	10/8/2018 10:05 AM
66	share state wide aggregate information but review details for each region. Share best practices so we all can show improvement. Do not let comprehensive centers be the primary routing for LVOs.	10/8/2018 9:45 AM