



# **Project Title**

Reducing Door-to-Puncture Time for Endovascular Thrombectomy in Stroke

### **Project Lead and Members**

Project members: Leong Man Qing, Yeo Su Qian, Dr Liu Zhenghong, Chew Jing Si, Tan II Fan, Dr Nijanth Manohararaj, Dr Tan Zhibin, Dr Sumit Kumar Sonu, Dr Rahalkar Kshitij, Lim Kai Xuan Kenneth, Dr Mavis Teo Miqi, Dr Rachel Leong Wei Li, Dr Wong Chen Pong, Dr David Wen Wei, Vithiya Raman, Terence Wong Wang Hong, Fiona Tay Mei Imm, Michael Maximo Ladera, Tan Xiong Wei, Dr Pang Yee Hau(Co-Leader), Dr Chia Ghim Song

# **Organisation(s) Involved**

Singapore General Hospital

### Healthcare Family Group(s) Involved in this Project

Allied Health, Healthcare Administration, Medicine, Nursing

#### **Applicable Specialty or Discipline**

Process Transformation & Improvement, Diagnostic Radiology, Neurology, Emergency Medicine, Anaesthesiology, Radiography

#### **Project Period**

Start date: March 2021

Completed date: January 2023

#### **Aims**

To reduce the time taken to start EVT for acute stroke patients presenting at SGHED from a median of 130 minutes to 80 minutes within 2 years.



# **Project Attachment**

See poster appended/ below

#### **Background**

See poster appended/below

#### Methods

See poster appended/ below

#### Results

See poster appended/below

#### **Lesson Learnt**

Structured QI methodology, iterative approaches, and close collaboration within a multidisciplinary team effectively reduced EVT door-to-puncture timings.

Tracking both quantitative and qualitative outcomes at each PDSA cycle facilitated quick refinements.

Sustaining interventions and results amid new junior doctor rotations posed challenges, mitigated by standardising and protocolising workflow, communication and documentation.

Reflecting on the project, we recognise that shorter time taken to test the interventions could accelerate improvements for patients.

#### **Additional Information**

National Healthcare Innovation & Productivity (NHIP) 2024 – Best Practice (Care Redesign category)

#### Conclusion

See poster appended/below



# CHI Learning & Development (CHILD) System

# **Project Category**

Care & Process Redesign

Access to Care, Waiting Time, Referral Rate

# **Keywords**

Door-to-Puncture, EVT, Stroke

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