

| COUNTY OF VENTURA<br>HEALTH CARE AGENCY   |  | EMERGENCY MEDICAL SERVICES<br>POLICIES AND PROCEDURES |
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| Policy Title:<br>Thrombectomy Capable Acute Stroke Center (TCASC) Standards   |  | Policy Number<br>452                                  |
| PPROVED:<br>Administration: <br>Steven L. Carroll, Paramedic |  | Date: July 1, 2025                                    |
| APPROVED:<br>Medical Director: <br>Daniel Shepherd, MD       |  | Date: July 1, 2025                                    |
| Origination Date: July 26, 2017<br>Date Revised: January 26, 2025<br>Last Review: January 26, 2025<br>Review Date: January 31, 2028           |  | Effective Date: July 1, 2025                          |

I. PURPOSE: To define the criteria for designation as a Thrombectomy Capable Acute Stroke Center (TCASC) in Ventura County.

II. AUTHORITY: California Health and Safety Code, Sections 1797.114, 1797.220, 1798, 1798.2, 1798.101, and California Code of Regulations, Title 22, Section 100091.03 and 100096.02.

III. DEFINITIONS:

**Acute Stroke Center (ASC):** Hospital designated as an Acute Stroke Center, as defined in VCEMS Policy 450.

**LVO Alert:** A pre-arrival notification by pre-hospital personnel to the base hospital that a patient is suffering a possible Large Vessel Occlusion (LVO) ischemic stroke.

**Thrombectomy Capable Acute Stroke Center: (TCASC)** Acute Stroke Center (ASC) that has the capability to perform neuroendovascular procedures for acute stroke including thrombectomy and intra-arterial thrombolysis.

IV. POLICY:

A. A Thrombectomy Capable Acute Stroke Center (TCASC), approved and designated by Ventura County EMS (VCEMS), shall meet the following requirements:

1. All the requirements of an Acute Stroke Center (ASC) as defined in Policy 450.
2. Certified as a Thrombectomy-Capable Stroke Center (TSC) by The Joint Commission or a Primary Plus by Det Norske Veritas, or a Comprehensive Stroke Center (CSC) by either The Joint Commission or Det Norske Veritas

3. Neurointerventionalist on call 24/7 and available on-site at TCASC within 45 minutes of notification of an LVO alert.
4. Neurosurgeon on call 24/7 and available to provide care as indicated.
5. Neurologist, with hospital privileges to provide ICU level of care for acute stroke patients, on call 24/7 and available to provide care as indicated.
6. An individual Neurointerventionalist or Neurosurgeon may not be simultaneously on call for a separate hospital.
7. Appropriate endovascular catheterization laboratory personnel available on-site within 45 minutes of notification of an LVO alert
8. Will create policies and procedures detailing how the TCASC will notify the appropriate personnel of an LVO alert.
9. Will accept all LVO alert patients, regardless of ICU or ED saturation status, except in the event of internal disaster or no catheterization laboratory availability.
10. Will create policies and procedures detailing how the TCASC will manage the presentation of concurrent LVO alerts.
11. Will create policies and procedures detailing how the TCASC plans to manage competing demands on the procedure suite (staffing, other cardiovascular procedures).
12. Will create policies and procedures that allow the automatic acceptance of any LVO patient from a Ventura County Hospital upon notification by the transferring physician.
13. Ability to perform endovascular procedures as indicated for emergent large vessel occlusions.
14. Have CT or MRI perfusion capabilities.
15. Maintain appropriate staff and facility availability to address complications of emergent endovascular procedures.
16. Will participate in the Ventura County Stroke Registry in accordance with policy 450.

B. Designation Process:

1. Application:  
Eligible hospitals shall submit a written request for TCASC designation to VCEMS no later than 30 days prior to the desired date of designation, documenting the compliance of the hospital with Ventura County TCASC Standards.
2. Approval:

- a. Upon receiving a written request for TCASC designation, VCEMS will arrange an on-site survey of the requesting hospital to assure compliance with stated requirements.
    - b. TCASC approval or denial shall be made in writing by VCEMS to the requesting hospital within two weeks after receipt of the request for approval and all required documentation and completion of the VCEMS site survey.
    - c. Certification as a TSC or Primary Plus, or a CSC by The Joint Commission or Det Norske Veritas shall occur no later than six months following designation as a TCASC by VCEMS.
  3. VCEMS may deny, suspend, or revoke the designation of an TCASC for failure to comply with any applicable policies, procedures, or regulations. Requests for review or appeal of such decisions shall be brought to the Ventura County Board of Supervisors for appropriate action.
  4. The VCEMS Medical Director may grant an exception to a portion of this policy upon substantiation of need by the TCASC that compliance with the regulation would not be in the best interests of the persons served within the affected area.
  5. TCASCs shall be reviewed on a biannual basis.
    - a. TCASCs shall receive notification of evaluation from the VCEMS.
    - b. TCASCs shall respond in writing regarding program compliance.
    - c. On-site TCASC visits for evaluative purposes may occur.
    - d. TCASCs shall notify VCEMS by telephone, followed by a letter or email within 48 hours, of changes in program compliance or performance.
- C. Provisional Designation Process
- VCEMS may grant provisional designation as a TCASC to a requesting hospital that has satisfied the requirements of a TCASC as outlined in section A of this policy but has yet to receive certification by an approving body. Only when the following requirements are satisfied will VCEMS grant a provisional designation:
1. Application:  
Eligible hospitals shall submit a written request for provisional TCASC designation to VCEMS no later than 30 days prior to the desired date of provisional designation, documenting the compliance of the hospital with Ventura County TCASC Standards.
  2. Provisional Approval:

- a. Upon receiving a written request for provisional TCASC designation, VC EMS will arrange an on-site survey of the requesting hospital to assure compliance with stated requirements.
  - b. Provisional TCASC approval or denial shall be made in writing by VCEMS to the requesting hospital within two weeks after receipt of the request for approval and all required documentation, as well as completion of the VC EMS site survey.
  - c. Certification as a Thrombectomy-capable Stroke Center, Primary Plus or Comprehensive Stroke Center by The Joint Commission or Det Norske Veritas shall occur no later than six months following provisional designation as an TCASC by VCEMS.
3. VCEMS may deny, suspend, or revoke the designation of an TCASC for failure to comply with any applicable policies, procedures, or regulations. Requests for review or appeal of such decisions shall be brought to the Ventura County Board of Supervisors for appropriate action.