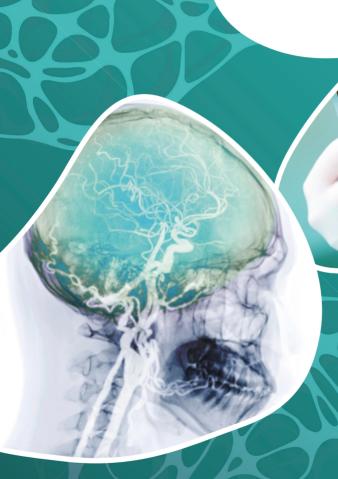


Minimizing Door to Reperfusion Times in Drip and Ship Model for Patients with Acute Ischemic Stroke.





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PROJECT BACKROUND

MDR in AIS aims to improve outcomes for Large Vessel Occlusion (LVO) Acute Ischemic Stroke (AIS) patients transferred to Comprehensive Stroke Centres (CSCs) for Mechanical Thrombectomy (MT) through a streamlined management pathway. It addresses quality, safety, equity, efficiency, effectiveness, accessibility, sustainability, and economy in health systems. The rising incidence of AIS and demand for MT burden healthcare systems and emergency departments. The project seeks to alleviate this by implementing evidence-based workflows similar to those in ST-Elevated Myocardial Infarction management.

The optimized pathway enhances decision-making, collaboration, referrals, and leverages telemedicine for timely interventions, reducing delays, and improving patient outcomes. Successful implementation could positively impact various health systems, promote evidence-based practices, and foster collaboration across Europe. Stakeholder cooperation is key to improving services, achieving economic gains, and addressing differences among European countries. This innovative approach aims to tackle future healthcare challenges and increase system resilience.

PROJECT OBJECTIVES



IMPROVE the in-hospital workflow for LVO AIS patients to minimize treatment delays and optimize outcome



ASSESS the efficacy and safety of the streamlined in-hospital workflow compared to the standard pathway



IDENITFY challenges and issues in stroke management and implementation of telemedicine



COMPARE the outcomes and feasibility of the optimized workflow in different clinical settings and partner countries



EXPLORE the potential application of streamlined pathways for other time-sensitive morbidities and improving services for all patients



PROJECT FACTS

Duration

03/2024 to 03/2027

Programme

Horizon Europe Grant Agreement No. 101095654

Identification Code

FP-112

Coordinator

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