

# Current Updates in Neurology and Neuroscience

Review Report

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**Article Title:** Lower Door to Needle Times – Is it the Pace that Kills?

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**Review Status:** Revision Required

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## Review Report

The authors present a very well-written paper about the changes in various outcomes for acute ischemic stroke in their hospital, after they instituted several interventions aimed at improving quality of care. I think the paper needs the following revisions before it is ready for publication.

### Major Revisions

1. Statistics for onset to needle time
2. Greater coverage of the interventions that you did, in the discussion. Also, discuss briefly how each intervention might have helped to change the outcome parameters.
3. For mortality, it would be important to know whether intra-arterial therapies were used. It would be good to have a figure showing the change in the numbers of intra-arterial therapies over the study period. Of course, you would only need to calculate this in the IVT patients that you have already studied, not in the entire population seen in your hospital.
4. Change in the length of hospital stay for the IVT patient population is also an important metric that would add value to this paper, since that is another crucial marker of quality.
5. The total number of “stroke alerts” would be good to know - however I think it might not be easy for you to get this information, so it is not crucial. The reason it would be good is that this can tell us if the increase in IVT use was because of greater patient numbers, or better screening by the ER. Alternatively you could give a figure showing the number of patients seen in your ER or your hospital as a whole annually over the years.
6. Are you counting AIS patients seen on the other inpatient services, who were admitted to the hospital for some other reason but then developed AIS symptoms? If not, please add a few lines about that and why you excluded them.

I have read this submission. I believe that I have an appropriate level of expertise to confirm that it is of an acceptable scientific standard, however I have significant reservations, as outlined above.