

1 10A NCAC 14L .0101 is proposed for adoption as follows:

2
3 **SUBCHAPTER 14L – STROKE CENTER DESIGNATION**

4
5 **SECTION .0100 – DEFINITIONS**

6
7 **10A NCAC 14L .0101 DEFINITIONS**

8 The following definitions apply throughout this Subchapter:

- 9 (1) “Acute Stroke Care” means the process for the rapid assessment and treatment of patients
10 experiencing an acute cerebrovascular accident.
- 11 (2) “Catchment Area” means the geographical area from which a hospital's patients are drawn.
- 12 (3) “Comprehensive Stroke Care” means state-of-the-art infrastructure, staff and training to receive
13 and treat patients with the most complex stroke cases, including advanced imaging capabilities, 24
14 hours per day, seven days per week availability of specialized treatments, and staff with the unique
15 education and competencies to care for complex stroke patients.
- 16 (4) “Comprehensive Stroke Center” means a hospital that has satisfied all requirements for
17 certification from a nationally recognized hospital certifying organization for the provision of
18 comprehensive stroke care.
- 19 (5) “Conditional Designation” means a hospital that is pursuing certification but has not satisfied all
20 certification requirements of the national accrediting body to qualify for Primary Stroke Center or
21 Comprehensive Stroke Center designation.
- 22 (6) “Department” means the Department of Health and Human Services.
- 23 (7) “Designated Stroke Center” means a hospital that has presented evidence to the Department of
24 current certification by a national accrediting organization as a Comprehensive or Primary Stroke
25 Center.
- 26 (8) “Designation” means the recognition by the Department of a hospital’s certification by a
27 nationally recognized hospital certifying organization for the provision of comprehensive or acute
28 stroke care.
- 29 (9) “EMS System” means a coordinated arrangement of local resources under the authority of the
30 county government (including all agencies, personnel, equipment, and facilities) organized to
31 respond to medical emergencies and integrated with other health care providers and networks
32 including public health, community health monitoring activities, and special needs populations,
33 that are approved by the Department in accordance with the EMS and Trauma Rules of the North
34 Carolina Medical Care Commission 10A NCAC 13P .0201.
- 35 (10) “EMS Provider” means those entities defined in G.S. 131E-155(13a) that hold a current license
36 issued by the Department pursuant to G.S. 131E-155.1.
- 37 (11) “Office of Emergency Medical Services (OEMS)” means a section of the Division of Health
38 Service Regulation of the North Carolina Department of Health and Human Services located at
39 1201 Umstead Drive, Raleigh, North Carolina 27603.

1 (12) “Primary Stroke Center” means a hospital that has satisfied all requirements for certification from
2 a nationally recognized hospital accrediting organization for the provision of acute stroke care.

3

4 *History Note:* *Authority G.S. 143B-10; 131E-78.5;*

5 *Eff. February 1, 2015.*