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SENATE JOINT MEMORIAL 31
46TH LEGISLATURE - STATE OF NEW MEXICO - FIRST SESSION, 2003

INTRODUCED BY

Michael S. Sanchez

A JOINT MEMORIAL

**REQUESTING THE SECRETARY OF HEALTH TO APPOINT A STROKE TASK
FORCE TO EVALUATE POTENTIAL STRATEGIES FOR STROKE AWARENESS,
PRE-HOSPITAL AND ACUTE STROKE TREATMENT AND TO DEVELOP A
STATEWIDE NEEDS ASSESSMENT OUTLINING RELEVANT RESOURCES FOR
RESPONSE, DIAGNOSIS AND TREATMENT IN PRE-HOSPITAL AND ACUTE
CARE SETTINGS.**

**WHEREAS, stroke is the third leading cause of death in the
United States today, ranking behind only heart disease and
cancer, with nearly one hundred seventy-five thousand Americans
dying each year from stroke; and**

**WHEREAS, stroke is the leading cause of severe long-term
disability in the United States and each year more than seven
hundred fifty thousand Americans suffer a new or recurrent
stroke; and**

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1 WHEREAS, stroke is a leading cause of death and disability
2 in New Mexico, killing two New Mexicans every day and disabling
3 over three thousand New Mexicans every year; and

4 WHEREAS, adults with diabetes and Hispanic populations are
5 at a higher risk in general for stroke; and

6 WHEREAS, currently available treatments may reduce the
7 number of deaths and disabilities caused by strokes; and

8 WHEREAS, there are five links in the stroke chain of
9 survival:

10 A. rapid recognition and reaction to stroke warning
11 signs;

12 B. rapid start of pre-hospital care;

13 C. rapid emergency medical services system
14 transport and hospital pre-notification;

15 D. rapid diagnosis and treatment at the hospital;
16 and

17 E. appropriate rehabilitation; and

18 WHEREAS, the American stroke association believes that by
19 strengthening the chain of survival the outcomes for many
20 stroke patients can be improved; and

21 WHEREAS, Americans will pay approximately forty-nine
22 billion dollars (\$49,000,000,000) in the coming year for
23 stroke-related medical and disability costs that may be reduced
24 through improved response, diagnosis and treatment for stroke;

25 NOW, THEREFORE, BE IT RESOLVED BY THE LEGISLATURE OF THE

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1 STATE OF NEW MEXICO that the secretary of health be requested
2 to appoint a stroke task force to evaluate potential strategies
3 for stroke awareness, pre-hospital and acute stroke treatment
4 and develop a statewide needs assessment, outlining relevant
5 resources for response, diagnosis and treatment in pre-hospital
6 and acute care settings; and

7 BE IT FURTHER RESOLVED that the task force be composed of
8 eighteen members as follows:

- 9 A. one stroke survivor;
- 10 B. one stroke family caregiver;
- 11 C. six physicians actively involved in stroke care,
12 such as representatives from the following specialties:

13 primary care, emergency medicine, neurology, neurosurgery,
14 neuroradiology and psychiatry;

- 15 D. three allied health professionals actively
16 involved in acute or rehabilitative stroke care, such as
17 representatives of the following: occupational therapy,
18 physical therapy, speech language pathology and registered
19 nursing;

- 20 E. one pre-hospital emergency medical services
21 person;

- 22 F. one urban and one rural hospital administrator;

- 23 G. one health insurance administrator or
24 representative; and

- 25 H. three representatives from interested nonprofit

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1 groups, such as the following: the New Mexico medical review
2 association, the American stroke association and the brain
3 injury association of New Mexico; and

4 BE IT FURTHER RESOLVED that the duties of the task force
5 include:

6 A. the completion of a statewide comprehensive
7 stroke awareness and stroke treatment needs assessment,
8 including:

9 (1) stroke awareness at the public, emergency
10 medical services and hospital levels for prevention, early
11 response and public and professional education;

12 (2) stroke treatment at the emergency medical
13 services, emergency department or facility and rehabilitation
14 levels;

15 (3) access to rapid transport, state-of-the-
16 art diagnostic technologies and treatments and consistent
17 diagnosis and treatment; and

18 (4) optimal utilization of resources for
19 efficiency and effectiveness;

20 B. the development of recommendations for New
21 Mexico based on the evaluation of state-of-the-art stroke
22 treatments in all stages of the stroke care continuum practiced
23 outside New Mexico for:

24 (1) potential implementation strategies for
25 stroke therapies, including a stroke center system, based on

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1 medical evidence; and

2 (2) creation of a statewide comprehensive,
3 consistent system of stroke care that will provide rapid and
4 appropriate stroke treatment in all stages of the stroke care
5 continuum to optimize outcomes;

6 C. a projection of the health, quality of life and
7 economic benefits of optimal stroke treatment; and

8 D. an exploration of funding opportunities to
9 support implementation of the task force recommendations; and

10 BE IT FURTHER RESOLVED that the task force report its
11 findings and recommendations to the department of health, the
12 legislative health and human services committee and the
13 governor prior to the first session of the forty-seventh
14 legislature; and

15 BE IT FURTHER RESOLVED that copies of this memorial be
16 transmitted to the governor and the secretary of health.

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