



ELIH to Soon Become Stroke Center

Beth Young | January 7, 2025



When you're having a stroke, every minute is crucial between the time you and those around you realize what's happening and the time you receive care.

The emergency room staff at Stony Brook Eastern Long Island Hospital have long known the need for stroke care on the North Fork, where the aging population is at high risk of sudden disruption of blood flow to their brains.

They're hoping early in the new year to receive New York State Primary Stroke Center designation, enabling Emergency Medical Services agencies to bring these patients to Greenport.

Stroke patients are now taken by volunteer ambulance crews further west for treatment, at a time when they may be losing nearly two million brain cells every minute they are being transported to care.

"The North Fork has the highest geriatric population per capita in New York State, and stroke primarily affects older people," said Dr. Lawrence Schiff, the Chair of Emergency Medicine at ELIH. "We do have a need to become a Stroke Center."

The hospital announced in late 2024 that it is now participating in Stony Brook's "24/7 TeleStroke" program, enabling a neurologist at Stony Brook University Hospital to consult through telemedicine with

stroke patients and staff at ELIH, a significant milestone in the Primary Stroke Center designation process.

Dr. Schiff said the hospital hopes to receive the Stroke Center certification in the first quarter or the first half of 2025.

The largest piece of the certification process will be the hospital's acquisition of a second CT scanner, enabling around-the-clock access to imaging to help doctors determine whether strokes are caused by a blood clot or bleeding. This is a crucial factor in determining how to treat patients, because the two types of stroke require completely opposite treatments.

The hospital is also planning to have a pharmacist on staff around-the-clock to fill orders for tailored medications that can either break up a blood clot or stop hemorrhaging, which is often seen in patients taking blood thinners.

Dr. Christopher Edelstein, the lead PA at the hospital, said there are medications that can be given in the emergency room to counteract the effects of blood thinners when someone is having a stroke caused by a brain bleed.

People who are having massive strokes that require physical removal of a blood clot with a catheter, known as mechanical thrombectomy, would be transported to the Cerebrovascular and Comprehensive Stroke Center at Stony Brook University Hospital, after being stabilized at ELIH.

Staffing will be crucial to this effort, at a time when it has become very difficult for even medical professionals to afford to live on the North Fork. Stroke Centers must be fully capable of responding to a stroke around the clock, and the hospital will also need to ensure patients receive preliminary speech therapy, occupational therapy and undergo swallowing studies before they leave the hospital for home or for long-term rehabilitation.

The ELIH Foundation is in the midst of a \$1.5 million fundraising campaign for the Stroke Center designation (more details are at elihfoundation.org/fundraising-initiatives).

Though the hospital will see any patient who walks in now seeking care for a stroke, and will treat patients already in the hospital who are experiencing stroke symptoms, local EMS agencies will not transport stroke patients to ELIH until the hospital receives the Stroke Center designation.

"EMS knows not to bring those patients here, but when we become a stroke center, they will be able to come here," said Dr. Schiff. "But patients may drive up, or they may develop a stroke while they're here, and we have to seek treatment and diagnose them."

Dr. Schiff holds monthly educational meetings with North Fork EMS providers, giving them updates on the hospital's capabilities, and information on how their care impacted the patient's outcomes once they were hospitalized.

Stony Brook currently has two Mobile Stroke Units — ambulances with CT scanners, specially trained EMS and nursing personnel and TeleStroke access to neurologists at Stony Brook — stationed in mid-Suffolk County, and is planning to ultimately position a third unit in Riverhead to service the North and South forks, said Dr. Schiff.

But such a unit would still be a long way from Greenport, Orient and Shelter Island, making the community hospital an important geographical link in access to time-sensitive care.

Public education about the signs and symptoms of strokes is also key to the hospital's mission. Dr. Edelstein and Dr. Schiff frequently give talks at local libraries, and for community and senior groups, about how to recognize the signs and symptoms of a stroke, and on how to know when to go to the emergency room.

They say they hope the community will learn more about the symptoms of a stroke — most of which come on suddenly and often involve just one side of the body. They include sudden weakness, numbness or drooping in the face, arm or leg; sudden difficulty seeing, trouble speaking or understanding speech; severe headaches; confusion and difficulty walking, dizziness or loss of balance. Patients may have difficulty realizing on their own that they are having a stroke.

"If you see somebody is having potential stroke symptoms, call 911 right away, and get to a Primary Stroke Center," said Dr. Schiff. "It's important to get them seen and evaluated in much more timely manner. Time is brain."

Dr. Edelstein and Shelter Island EMT James Preston will next be giving a talk on "Knowing When to Go to the ER" at the Shelter Island Library on Wednesday, Feb. 26 at 5 p.m.