

Provincial Stroke Repatriation Reference Document

Purpose

The Provincial Stroke Repatriation Reference Document provides a provincial framework, contextual reference, and expectations for the repatriation¹ of stroke patients following access to hyperacute stroke services at Regional, District or non-District Telestroke hospitals. The need for this document was identified by stroke system stakeholders who continue to experience challenges with respect to the repatriation of patients with stroke, in particular those repatriations which cross regional boundaries. This document does not replace regional Memorandums of Understanding (MOUs) nor does it replace [Critical Care Services Ontario's \(CCSO\) Repatriation Guide](#). Instead, this reference document is meant to complement these documents while providing additional clarity for those circumstances which fall outside the scope of these documents. Although regional nuances may exist, the overarching principles for all repatriations should remain the same.

CorHealth Ontario acknowledges that, at times, other factors (e.g., ED/bed capacity, variation in organization accountabilities) may present challenges or delays in supporting optimal repatriation. This document is not meant to be used punitively, rather to provide a common foundation to guide conversations and actions by providers that support system principles and enable best patient care where repatriation is required.

Background

- Stroke is a serious medical condition that can cause morbidity, mortality, and negatively impact quality of life. Stroke can result in significant social and economic burden to patients, families, and society overall.
- Time sensitive treatments (thrombolysis using tissue plasminogen activator (tPA) and endovascular thrombectomy (EVT)) are available that can reduce this impact if patients arrive to an appropriate stroke centre as soon as possible. This highly specialized hyperacute care is provided at a limited number of hospitals in Ontario.

¹ In the stroke system repatriation is considered any movement of the patient closer to home following access to a Regional Stroke Centre, District Stroke Centre or non-District Telestroke hospital for hyperacute assessment, diagnosis, and/or treatment.

- Systems of care have been put in place since 2005 to enable regionalized coordinated processes to be implemented to access hyperacute stroke care.
- Specialized hyperacute stroke services are accessed through²:
 - Regional and district paramedic bypass and referral/transfer protocols (e.g., for walk-in and inpatient),
 - Provincial referral and transfer process (Criticall Ontario), and
 - The Ontario Telestroke Program (Telestroke)

Systems of Care to Access Specialized Hyperacute Stroke Services

Regional/District/non-District Telestroke hospitals

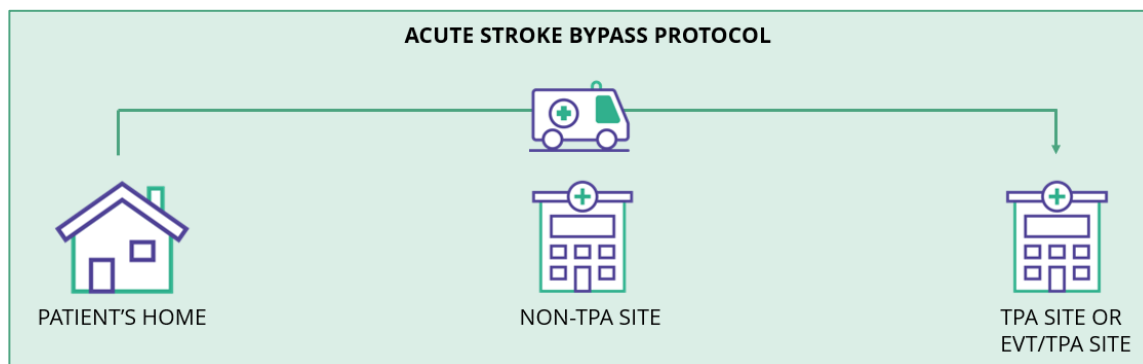
- Regional Stroke Centres and District Stroke Centres are accountable for:
 - The development, implementation, and coordination of stroke care within their region,
 - The provision of stroke care based on best practices and evidence, including 24/7 access to hyperacute stroke treatment (specialized care) within their resource capacity, and
 - Collaborating with paramedic service providers and all acute care organizations within their region to achieve an effective system.
- Several hospitals (regional, district and non-district) have become Telestroke hospitals, offering access to hyperacute services through a video enabled stroke specialist consultation model.
 - Telestroke is an emergency telemedicine application that provides emergency physicians immediate access to neurologists with expertise in stroke care who can support both the assessment and treatment of patients experiencing acute ischemic stroke symptoms.
- All Regional, District and non-District Telestroke Hospitals can provide tPA on-site (models of care vary). Select Regional and District Stroke Centres provide EVT on site as well.

² A detailed description of each of these pathways is provided in subsequent sections

Regional or District Bypass Protocols

- Provincially, all emergency health services utilize the [Basic Life Support Patient Care Standards Acute Stroke Bypass Protocol](#). This protocol includes standardized screening to support infield identification of stroke patients.
- When patients meet the stroke criteria, agreements have been established with local hospitals to allow EMS to redirect patients to the most appropriate stroke centres (Regional Stroke Centre, District Stroke Centre or non- District Telestroke Centre) for the purposes of assessment and delivery of hyperacute stroke services for eligible patients.

Example: Regional or District Bypass Protocol

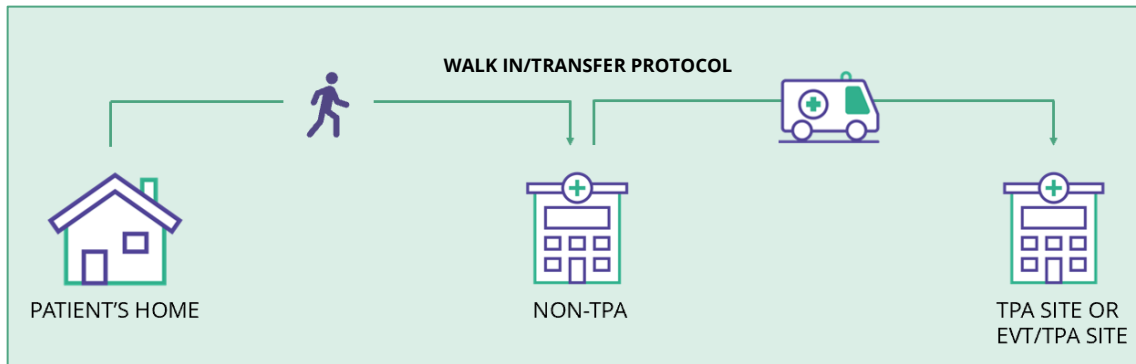


Regional Inter-Hospital Referrals (non CritiCall Ontario referrals)

- All stroke regions have created a 'safety net' for patients that present to non-designated stroke hospitals so that these patients are still screened for hyperacute stroke care eligibility.
 - Patients that do not call 911 in response to their stroke symptoms (in Ontario this occurs ~40%³ of the time) do not benefit from the early triage offered by the EMS providers to a designated stroke hospital.
- Stroke 'walk-in'/transfer protocols ensure clinical screening and assessment that will trigger a direct referral to the Regional, District or non-District Telestroke Hospital for consultative support and potential transfer for treatment.

³ [CorHealth Ontario \(2021\). Ontario Stroke Report 2019/2020](#)

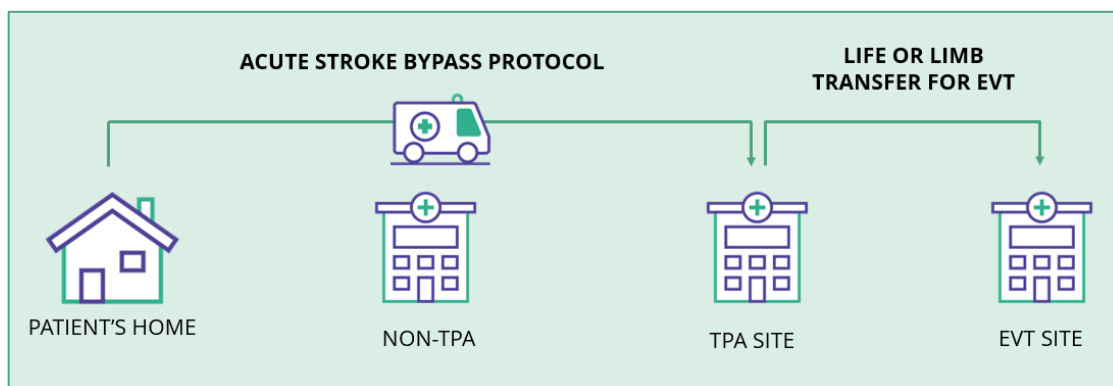
Example: Regional or District Inter-Hospital Referral Protocols



Provincial Inter-Hospital Life or Limb Referrals (Criticall Ontario Referrals)

- A provincial process is in place that utilizes CritiCall Ontario to facilitate access to hyperacute/tertiary services, including endovascular thrombectomy (EVT), for stroke patients.
- EVT is a highly specialized procedure that is performed at a select number of hospitals provincially (n=11). Referring centres utilize Criticall Ontario to access an EVT consultation at the closest appropriate EVT centre, which may be in another region of the province.
- Patients transferred for EVT under this process, are considered to meet the pre-established [Life or Limb Policy](#) as set out by CCSO. This protocol exists to “facilitate timely access to acute care services within a best effort window of 4 hours in order to improve outcomes for patients who are life or limb threatened.”^{4,p.4}

Example: Provincial Inter-Hospital Life or Limb Referrals



⁴ CCSO. (2013). Life or Limb Policy. Retrieved from https://www.health.gov.on.ca/en/pro/programs/criticalcare/docs/provincial_life_or_limb_policy.pdf

Out of Stroke Region or District

- Patients who experience a stroke outside of their home region (e.g., work or travel) may present to a designated or specialized stroke hospital closest to their current location following the pathways described above.

Patient Transfers Following Access to Specialized Stroke Care Hospitals (Repatriation)

- To enable a high functioning system, adequate patient flow to and from the specialized stroke hospitals is essential to maintain consistent access and capacity to these services for the broader stroke population.
- Patients who no longer require specialized resources at the designated stroke hospital will be repatriated to appropriate care closer to home. For patients with a diagnosis of stroke, stroke unit⁵ care is the appropriate level of care.
- Delays in repatriation from the Emergency Department, and therefore access to stroke unit care can negate the value of early stroke unit care which includes early stroke prevention, management of risk for post stroke complications and timely rehabilitation, all core elements strongly correlated to optimized patient's outcomes.^{6,7}

The following section provides **guidance to support the repatriation of stroke patients** irrespective of the pathways used to access hyperacute stroke care. In addition, sending and receiving hospitals should refer to regional/district Memorandums of Understanding and/or the [CCSO Repatriation Guide](#) where appropriate. *Table 1: Repatriation Documents*, identifies the most appropriate document(s) to reference when making repatriation decisions.

⁵ Specialized, geographically defined hospital unit dedicated to the management of stroke patients (JM Boulanger, MP Lindsay, G. Gubitz, et al. Canadian Stroke Best Practice Recommendations for Acute Stroke Management: Prehospital, Emergency Department and Acute Inpatient Stroke Care 6th Edition Updated 2018)

⁶ Ibid.

⁷ R Teasall, N Salbach, N Foley et al Canadian Stroke Best Practice Recommendations; Rehabilitation, Recovery and Community Participation following Stroke. Part One 6th Edition Update 2019. [International Journal of Stroke 2020. Vol 15\(7\): 763-788](#)

Table 1: Repatriation Documents

Pathway used to Access Specialized Hyperacute Stroke Services	Most Appropriate Document to Reference when making Repatriation Decisions
Regional or District Bypass Protocols	Regional Memorandums of Understanding*
Regional Inter-Hospital Referrals	Regional Memorandums of Understanding*
Provincial Inter-Hospital Referrals for EVT (i.e., Life or Limb Protocol)	CCSO Repatriation Guide *
Out of Region or District	CorHealth Ontario's Stroke Repatriation Reference Document

*CorHealth Ontario's Stroke Repatriation Reference Document may also be used as a contextual reference; overarching principles should align between the documents.

Principles for Repatriation⁸

- **A Patient Centred approach** that is guided by principles of
 - Patient safety, where transfers will not impose undue risk or harm to the patient's outcome,
 - Best practice, ensuring care provided aligns with expectations of quality care (e.g., stroke unit),
 - Timeliness, to optimize care delivery that supports the patient's outcome, and
 - Holistic perspective, striving to provide the most appropriate care, closest to home.
- **An efficient process for patients and partners in the system** by
 - Predominately leveraging "like to like" transfers (e.g. ED to ED or Inpatient to Inpatient)⁹
 - Maintaining timely flow and access within the system
 - Recommended transfer targets
 - As soon as possible, ideally within 4 hours and not exceeding 24 hours of an ED request
 - within 48 hours of an inpatient request
 - Repatriation should occur 7 days a week, 24 hours a day

⁸ Aligned to the [CCSO Repatriation Guide 2014](#) and the regional MOUs.

⁹ Regional solutions may allow for direct admission to a stroke unit from an ambulatory care bed (i.e., ED to Stroke Unit). Providers should contact their Regional Stroke Centre/Coordinator/Stroke Navigator (where available) and/or refer to regional or district MOUs for further guidance.

- **Appropriate level of care**
 - Stroke Units¹⁰ **are the appropriate level of care** for non-critical patients who have a confirmed acute stroke diagnosis and who require admission to acute care, whether EVT and/or tPA was received.¹¹
 - In some instances, the 'closest' hospital to the patient's residence will not be identified as the 'home' hospital for repatriation, rather the 'home' hospital will be the closest hospital to the patient's residence that can provide the appropriate level of care. There will be cases where the closest stroke unit hospital to the patient's residence is the hyperacute treating hospital. In these instances, repatriation will not be required.
 - Stroke patients **will be repatriated to the closest stroke unit hospital** to their home, not limited by boundaries as may be defined by LHINs or Health regions. To understand how this principle is applied in different scenarios, refer to *Appendix A: Example of Stroke Repatriation*
- **Maintaining clinical/medical continuity of care** through
 - Direct physician to physician communication of the clinical plan of care and identification of a most responsible physician (MRP) at the receiving hospital,
 - Provision of relevant pharmaceutical or medical supplies when appropriate,
 - Adherence to Ministry of Health/Provincial Public Health infection control protocols as appropriate (e.g., MRSA, VRE, SARS, COVID-19) and these should not impose a barrier to transfer, and
 - Provision of appropriate documentation at the time of transfer.

Implementation Supports

Repatriation Tool – the Provincial Hospital Resource System (PHRS)

The Provincial Hospital Resource System Repatriation Tool, developed and operated by CritiCall Ontario, allows hospitals to electronically send and receive requests for the repatriation of admitted patients and can be used to facilitate and track all inpatient repatriation transfer requests. Data and reports from the Repatriation Tool are available through CritiCall Ontario's Reports and Data portal with Business Intelligence (CORD BI).

¹⁰ Specialized, geographically defined hospital unit dedicated to the management of stroke patients (JM Boulanger, MP Lindsay, G. Gubitz, et al. Canadian Stroke Best Practice Recommendations for Acute Stroke Management: Prehospital, Emergency Department and Acute Inpatient Stroke Care 6th Edition Updated 2018)

¹¹ Ibid.

Users can view overall volumes and proportion of repatriations that occur within the recommended timeframes.

For the purposes of supporting the movement of *admitted* stroke patients, all stroke transfer requests can be categorized as Repatriation (transfer type) within the tool.¹² When requesting a stroke repatriation, users should select “stroke” as the sending service/specialty and also select “stroke” as the bed type being requested.

In addition to the PHRS, methods to monitor the repatriation of non admitted patients from the Emergency Department should be considered to enable a comprehensive understanding of repatriation processes. Organizations are encouraged to review their data on a regular basis to identify opportunities for quality improvement discussions.

Stroke Unit Mapping Tool

The Stroke Unit Mapping Tool (Appendix B), developed by the Regional Stroke Networks, allows hospitals to identify the closest stroke unit hospital to the patient’s home. Hospitals should leverage this tool to support the repatriation of patients who experience a stroke outside of their home region (e.g., work or travel) and/or in circumstances where the patient is referred to or bypassed to a hospital outside of their home region (e.g., provincial inter-hospital referrals).

Addressing Repatriation Challenges

Hospitals providing specialized services should have procedures in place to address unsuccessful or difficult repatriations (e.g., exceeding reasonable repatriation timelines or refusals by the home hospital). It is recommended that hospitals seek to identify potential challenges (e.g., cross regional repatriations) early, engage with the Regional Stroke Network representatives and work collaboratively to address issues or ‘incidents’ as they arise which may violate the repatriation principles described. A proactive continuous quality improvement perspective should guide discussions to minimize risk of recurring incidents.

The following individuals should be engaged when addressing repatriation challenges:

¹² The PHRS cannot be used for patients being repatriated from Ambulatory Care Settings (e.g., Emergency Department)

- Regional Stroke Directors or District Stroke Coordinators as they have relationships with the stroke unit hospitals within their Stroke Networks of Care and can provide a systems perspective to assist in resolving the issue.
- Medical Chiefs of Staff could also be engaged locally if decisions regarding repatriation require further clinical guidance regarding suitability or timeliness.
- Persisting challenges may require dialogue between the clinical vice-presidents or the appropriate highest administrative individual in the respective hospitals.¹³

CorHealth Ontario's Stroke Unit Initiative

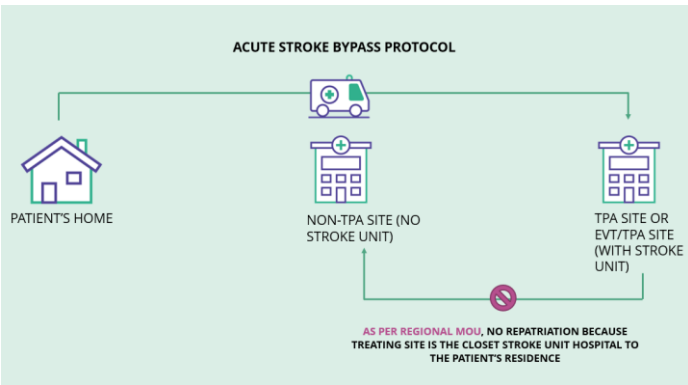
Many of the challenges associated with repatriation reflect variable and inadequate access to stroke unit care across the province. In 2019/20, only 54%¹⁴ of Ontario stroke patients received treatment on a designated stroke unit. CorHealth Ontario, in collaboration with system stakeholders, identified stroke unit care as a provincial work plan priority. The Stroke Unit Initiative aims to improve access to evidence-based stroke unit care across the province. Key deliverables within this work will be to identify the barriers and enablers to stroke unit access; and to implement recommendations to facilitate increased access to stroke unit care.

¹³ [CCSO Repatriation Guide 2014](#)

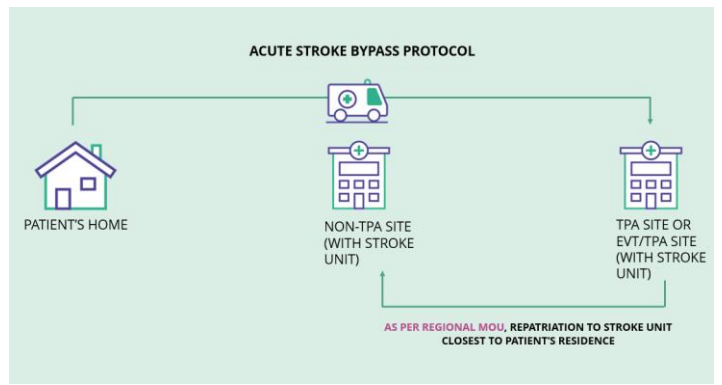
¹⁴ [CorHealth Ontario \(2021\). Ontario Stroke Report 2019/2020](#)

Appendix A: Examples of Stroke Repatriation¹⁵

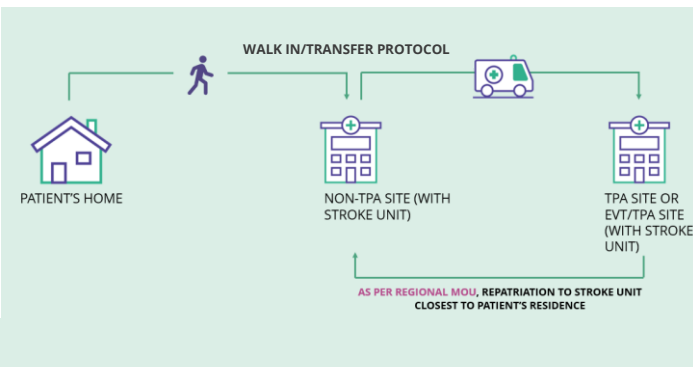
Example: Repatriation After Regional or District Bypass



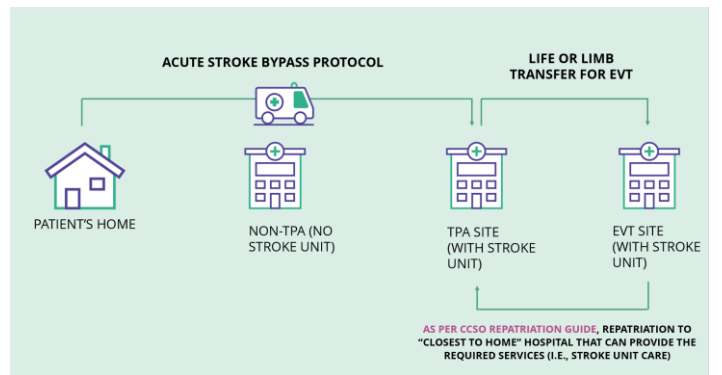
Example: Repatriation After Regional or District Bypass



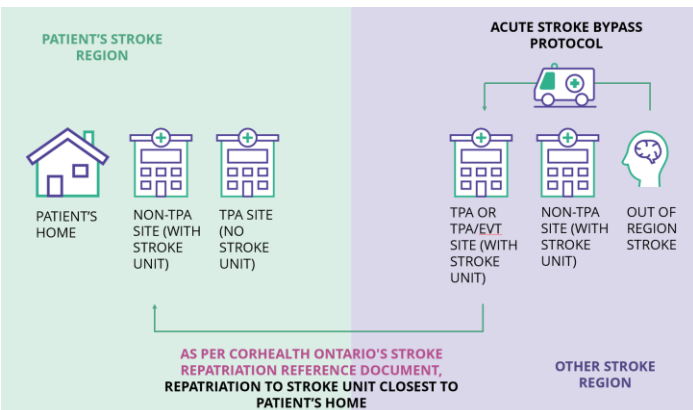
Example: Repatriation After Inter-Hospital Referral



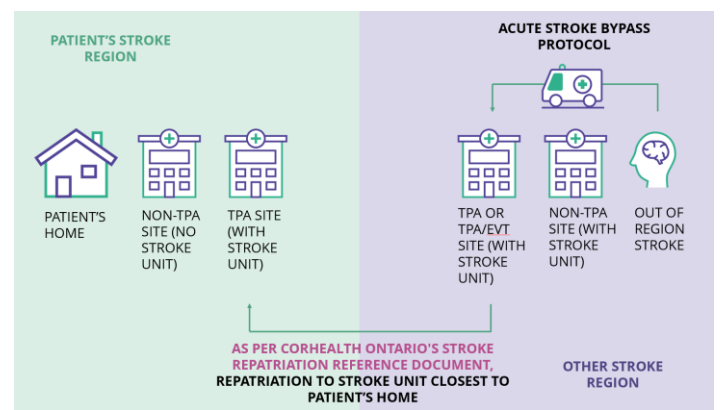
Example: Repatriation After Inter-Hospital Referral



Example: Repatriation After Provincial Inter-Hospital Life or Limb Referrals



Example: Repatriation After Provincial Inter-Hospital Life or Limb Referrals



¹⁴ Diagrams are examples only; other scenarios may be encountered

Appendix B: Stroke Unit Mapping Tool

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
West	1	Bluewater Health - Petrolia	Bluewater Health - Sarnia
West	1	Bluewater Health - Sarnia	Bluewater Health - Sarnia
West	1	Chatham-Kent Health Alliance - Sydenham Campus (Wallaceburg)	Chatham-Kent Health Alliance - Chatham
West	1	Leamington District Memorial	Windsor Regional Hospital - Ouellette
West	1	Public General Hospital (Chatham)	Chatham-Kent Health Alliance - Chatham
West	1	Windsor Regional Hospital - Metropolitan	Windsor Regional Hospital - Ouellette
West	1	Windsor Regional Hospital - Ouellette Campus (Windsor)	Windsor Regional Hospital - Ouellette
West	2	Alexandra Hospital, Ingersoll	London Health Sciences Centre-University
West	2	Alexandra Marine & General Hospital	Huron Perth Health Alliance - Stratford
West	2	Grey Bruce Health Service - Lions Head	Grey Bruce Health Service - Owen Sound
West	2	Grey Bruce Health Service - Markdale	Grey Bruce Health Service - Owen Sound
West	2	Grey Bruce Health Service - Meaford	Grey Bruce Health Service - Owen Sound
West	2	Grey Bruce Health Systems - Owen Sound	Grey Bruce Health Systems - Owen Sound
West	2	Grey Bruce Health Service - Southampton	Grey Bruce Health Service - Owen Sound
West	2	Hanover & District Hospital	Grey Bruce Health Service - Owen Sound
West	2	Huron Perth Health Alliance - Clinton	Huron Perth Health Alliance - Stratford
West	2	Huron Perth Health Alliance - Seaforth	Huron Perth Health Alliance - Stratford
West	2	Huron Perth Health Alliance - St. Mary's	Huron Perth Health Alliance - Stratford
West	2	Huron Perth Health Alliance - Stratford	Huron Perth Health Alliance - Stratford
West	2	Grey Bruce Health Service - Wiarton	Grey Bruce Health Service - Owen Sound
West	2	Listowel Memorial Hospital	Huron Perth Health Alliance - Stratford
West	2	London Health Sciences Centre - University	London Health Sciences Centre - University
West	2	London Health Sciences Centre - Victoria Hospital	London Health Sciences Centre - University

¹⁶ Specialized, geographically defined hospital unit dedicated to the management of stroke patients (JM Boulanger, MP Lindsay, G. Gubitz, et al. Canadian Stroke Best Practice Recommendations for Acute Stroke Management: Prehospital, Emergency Department and Acute Inpatient Stroke Care 6th Edition Updated 2018)

¹⁷ All stroke units listed are recognized by Regional Stroke Steering Committee as providing stroke unit care

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
West	2	Middlesex Hospital Alliance - Four Counties Health Services	London Health Sciences Centre - University
West	2	Middlesex Hospital Alliance - Strathroy Middlesex General Hospital	London Health Sciences Centre - University
West	2	South Grey Bruce Health Centre - Chesley	Grey Bruce Health Service - Owen Sound
West	2	South Grey Bruce Health Centre - Durham	Grey Bruce Health Service - Owen Sound
West	2	South Grey Bruce Health Centre - Kincardine	Grey Bruce Health Service - Owen Sound
West	2	South Grey Bruce Health Centre - Walkerton	Grey Bruce Health Service - Owen Sound
West	2	South Huron Hospital	Huron Perth Health Alliance - Stratford
West	2	St. Joseph's Health Care	London Health Sciences Centre - University
West	2	St. Thomas Elgin General Hospital (STEGH)	St. Thomas Elgin General Hospital
West	2	Tillsonburg District Memorial Hospital	St. Thomas Elgin General Hospital
West	2	Wingham & District Hospital	Huron Perth Health Alliance - Stratford
West	2	Woodstock Hospital	London Health Sciences Centre - University
West	3	Cambridge Memorial Hospital	Grand River Hospital
West	3	Grand River Hospital - Freeport	Grand River Hospital
West	3	Grand River Hospital Kitchener	Grand River Hospital
West	3	Guelph General Hospital	Guelph General Hospital
West	3	Groves Memorial Community Hospital	Guelph General Hospital
West	3	Homewood Health Centre	Guelph General Hospital
West	3	North Wellington Health Care - Louise Marshall Hospital	Guelph General Hospital
West	3	North Wellington Health Care - Palmerston & District Hospital	Guelph General Hospital
West	3	St. Mary's General Hospital	Grand River Hospital
West	4	Brant Community Health System - Brantford General	Brantford General Hospital
West	4	Haldimand War Memorial Hospital	Hamilton General Hospital
West	4	Hamilton Health Sciences - Hamilton General	Hamilton General Hospital
West	4	Hamilton Health Sciences - Juravinski Hospital	Hamilton General Hospital
West	4	Hamilton Health Sciences - McMaster University MC	Hamilton General Hospital
West	4	Joseph Brant Memorial Hospital	Joseph Brant Hospital
West	4	Niagara Health Systems - Niagara Falls	Greater Niagara General Hospital
West	4	Niagara Health Systems - St. Catharines	Greater Niagara General Site
West	4	Niagara Health Systems - Welland	Greater Niagara General Site
West	4	Norfolk General Hospital	Brantford General Hospital

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
West	4	St. Joseph's Healthcare	Hamilton General Hospital
West	4	West Haldimand General Hospital	Brantford General Hospital
West	4	West Lincoln Memorial Hospital	Hamilton General Hospital
Central	5	Headwaters Health Care Centre	Trillium Health Partners - Mississauga Hospital
Central	5	William Osler Health Centre – Brampton Civic	William Osler Health Centre – Brampton Civic
Central	5	William Osler Health Centre – Etobicoke General	William Osler Health Centre – Etobicoke General
Central	6	Credit Valley Hospital	Trillium Health Partners - Mississauga Hospital
Central	6	Halton Healthcare - Georgetown	Halton Healthcare - Oakville Trafalgar
Central	6	Halton Healthcare - Milton District	Halton Healthcare - Oakville Trafalgar
Central	6	Halton Healthcare - Oakville Trafalgar	Halton Healthcare - Oakville Trafalgar
Central	6	Trillium Health Centre	Trillium Health Partners - Mississauga Hospital
Toronto	7	Michael Garron Hospital	Michael Garron Hospital
Toronto	7	Mount Sinai Hospital	University Health Network - Toronto Western
Toronto	7	Sunnybrook Health Sciences Centre	Sunnybrook Health Sciences Centre
Toronto	7	Unity Health Toronto - St. Joseph's Health Centre	Unity Health Toronto - St. Joseph's Health Centre
Toronto	7	Unity Health Toronto, St. Michael's Hospital site	St. Michael's Hospital
Central	7	University Health Network - Toronto General	University Health Network - Toronto Western
Toronto	7	University Health Network - Toronto Western	University Health Network - Toronto Western
Central	8	Humber River Regional Hospital - Wilson	Humber River Regional Hospital - Wilson
Central	8	Mackenzie Health (Richmond Hill)	Mackenzie Health (Cortellucci Vaughan)
Central	8	Markham Stouffville Hospital	Markham Stouffville Hospital
Central	8	North York General Hospital	North York General Hospital
Central	8	Southlake Regional Health Centre	Mackenzie Health (Cortellucci Vaughan)
Central	8	Stevenson Memorial Hospital	Royal Victoria Regional Hospital or Mackenzie Health, depending on where the patient lives
East	9	Campbellford Memorial Hospital	Peterborough Regional Health Centre
East	9	Haliburton Highland Health Services – Haliburton	Ross Memorial Hospital
East	9	Haliburton Highland Health Services - Minden	Ross Memorial Hospital
East	9	Lakeridge Health Corporation - Ajax & Pickering	Lakeridge Health Corporation - Oshawa
East	9	Lakeridge Health Corporation - Bowmanville	Lakeridge Health Corporation - Oshawa
East	9	Lakeridge Health Corporation - Oshawa	Lakeridge Health Corporation - Oshawa
East	9	Lakeridge Health Corporation - Port Perry	Lakeridge Health Corporation - Oshawa
East	9	Lakeridge Health Corporation - Whitby	Lakeridge Health Corporation - Oshawa

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
East	9	Markham Stouffville Hospital - Uxbridge	Lakeridge Health Corporation - Oshawa or Markham Stouffville Hospital
East	9	Northumberland Hills Hospital	Peterborough Regional Health Centre
East	9	Peterborough Regional HC	Peterborough Regional Health Centre
East	9	Ross Memorial Hospital	Ross Memorial Hospital
East	9	Scarborough Health Network - Birchmount Hospital	Scarborough Health Network – Birchmount Hospital
East	9	Scarborough Health Network - Centenary hospital	Scarborough Health Network – Birchmount Hospital
East	9	Scarborough Health Network - General Hospital	Scarborough Health Network – Birchmount Hospital
East	10	Brockville General Hospital	Brockville General
East	10	Kingston Health Sciences Centre - Kingston General Hospital	Kingston General Hospital
East	10	Lennox Addington County General Hospital	Kingston General
East	10	Perth & Smith Falls District Hospital - Great War Memorial	Brockville General Hospital
East	10	Perth & Smith Falls District Hospital - Smith Falls	Brockville General Hospital
East	10	Quinte Health Care - Bancroft	Quinte Health Care - Belleville General Hospital
East	10	Quinte Health Care - Belleville	Quinte Health Care - Belleville
East	10	Quinte Health Care - Picton	Quinte Health Care - Belleville General Hospital
East	10	Quinte Health Care - Trenton	Quinte Health Care - Belleville
East	11	Almonte General Hospital	The Ottawa Hospital - Civic Campus
East	11	Arnprior & District Memorial Hospital	The Ottawa Hospital - Civic Campus
East	11	Carleton Place & District Memorial Hospital	The Ottawa Hospital - Civic Campus
East	11	Children's Hospital of Eastern Ontario	The Ottawa Hospital - Civic Campus
East	11	Cornwall Community Hospital - McConnell	Cornwall Community Hospital For EVT: The Ottawa Hospital-Civic Campus
East	11	Deep River & District Hospital	Pembroke Regional
East	11	Glengarry Memorial Hospital	Cornwall Community Hospital For EVT: The Ottawa Hospital-Civic Campus
East	11	Hawkesbury & District General Hospital	Cornwall Community Hospital For EVT: The Ottawa Hospital-Civic Campus
East	11	Kemptville District Hospital	The Ottawa Hospital - Civic Campus
East	11	Montfort Hospital	Montfort Hospital For Hyperacute and EVT Treatment: The Ottawa Hospital-Civic Campus
East	11	Pembroke Regional Hospital	Pembroke Regional Hospital
East	11	Queensway Carleton Hospital	Queensway Carleton Hospital For Hyperacute and EVT: The Ottawa Hospital-Civic Campus

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
East	11	Renfrew Victoria Hospital	Pembroke Regional
East	11	St. Francis Memorial Hospital	Pembroke Regional
East	11	The Ottawa Hospital - Civic Campus	The Ottawa Hospital - Civic Campus
East	11	The Ottawa Hospital - General Campus	The Ottawa Hospital - Civic Campus
East	11	University of Ottawa Heart Institute	The Ottawa Hospital - Civic Campus
East	11	Winchester District Memorial Hospital	Cornwall Community Hospital For EVT: The Ottawa Hospital-Civic Campus
Central	12	Collingwood General & Marine Hospital	Royal Victoria Hospital - Barrie
Central	12	Georgian Bay General Hospital	Orillia Soldiers' Memorial Hospital- Orillia
Central	12	Muskoka Algonquin Health Centre - Bracebridge	Orillia Soldiers' Memorial Hospital- Orillia
Central	12	Muskoka Algonquin Health Centre - Huntsville	Orillia Soldiers' Memorial Hospital- Orillia
Central	12	Orillia Soldiers' Memorial Hospital	Orillia Soldiers' Memorial Hospital- Orillia
Central	12	Royal Victoria Regional Health Centre	Royal Victoria Hospital - Barrie
North	13	Blind River District Health Centre	Sault Area Hospital - General
North	13	Blind River Health Centre - Matthews Memorial	Sault Area Hospital - General
North	13	Blind River Health Centre - Thessalon Hospital	Sault Area Hospital - General
North	13	Chapleau Health Services	Timmins and District Hospital
North	13	Englehart & District Hospital	North Bay Regional Health Centre
North	13	Espanola General Hospital	Health Sciences North
North	13	Health Sciences North	Health Sciences North
North	13	Hornepayne Community Hospital	Sault Area Hospital - General
North	13	Kirkland & District Hospital	Timmins and District Hospital
North	13	Lady Dunn Health Centre	Sault Area Hospital - General
North	13	Mattawa General Hospital	North Bay Regional Health Centre
North	13	Manitoulin Health Centre - Little Current	Health Sciences North
North	13	Manitoulin Health Centre - Mindemoya	Health Sciences North
North	13	MIC's Group of Health Care - Anson General	Timmins and District Hospital
North	13	MIC's Group of Health Care - Bingham Memorial	Timmins and District Hospital
North	13	MIC's Group of Health Care - Lady Minto	Timmins and District Hospital
North	13	North Bay Regional	North Bay Regional Health Centre
North	13	North Bay Regional HC - Kirkwood	Health Sciences North
North	13	Notre Dame Hospital	Timmins and District Hospital
North	13	Sault Area Hospital - General	Sault Area Hospital - General
North	13	Sensenbrenner Hospital	Timmins and District Hospital
North	13	Smooth Rock Falls Hospital	Timmins and District Hospital
North	13	St. Joseph's General Hospital	Health Sciences North

Ontario Health Region	LHIN	Hospital Closest to Patient's Residence	Closest Stroke Unit ¹⁶ for Repatriation ¹⁷
North	13	Temiskaming Hospital	North Bay Regional Health Centre
North	13	Timmins & District	Timmins and District Hospital
North	13	Weeneebayko Area Health Authority - Attawapiskat Hospital	Timmins and District Hospital
North	13	Weeneebayko Area Health Authority - Fort Albany Hospital	Timmins and District Hospital
North	13	Weeneebayko Area Health Authority - Moosonee Health Centre	Timmins and District Hospital
North	13	Weeneebayko Area Health Authority - Weeneebayko General Hospital	Timmins and District Hospital
North	13	West Nipissing General Hospital	North Bay Regional Health Centre
North	13	West Parry Sound Health Centre	North Bay Regional Health Centre or Orillia Soldiers' Memorial Hospital, whichever is closest to where the patient lives
North	14	Atikokan General Hospital	Thunder Bay Regional Health Sciences Centre
North	14	Dryden Regional Health Centre	Thunder Bay Regional Health Sciences Centre
North	14	Geraldton District Hospital	Thunder Bay Regional Health Sciences Centre
North	14	Lake of the Woods District Hospital	Thunder Bay Regional Health Sciences Centre
North	14	Manitouwadge General Hospital	Thunder Bay Regional Health Sciences Centre
North	14	Nipigon District Memorial Hospital	Thunder Bay Regional Health Sciences Centre
North	14	North of Superior Health Care Group - McCausland General Hospital - Terrace Bay	Thunder Bay Regional Health Sciences Centre
North	14	North of Superior Health Care Group - Wilson Memorial General Hospital (Marathon)	Thunder Bay Regional Health Sciences Centre
North	14	Red Lake Margaret Cochenour Memorial	Thunder Bay Regional Health Sciences Centre
North	14	RHCF - Emo	Thunder Bay Regional Health Sciences Centre
North	14	RHCF La Verendrye General Hospital	Thunder Bay Regional Health Sciences Centre
North	14	Sioux Lookout Meno Ya Win Health Centre	Thunder Bay Regional Health Sciences Centre
North	14	Thunder Bay Regional HS Centre	Thunder Bay Regional Health Sciences Centre