



Donald Hixson and Donald Hixson III

Stroke Care Close to Home

With telemedicine technology now available in MCMC clinics, patients receiving follow-up stroke care no longer have to make repeat trips to Portland.

Donald Hixson doesn't remember much about that night last summer. He recalls having a conversation with his son, then suddenly being in a confused state, unable to communicate, legs and arms not working as they always had in the past.

He remembers Donald Hixson III calling for an ambulance and hearing a couple words from the crew as they sped to the Mid-Columbia Medical Center Emergency Department.

But other than those fuzzy bits and pieces, Hixson has had to rely on others to tell the story of the night of Sept. 10. It was days later that he finally understood he had a stroke and was saved from potentially serious consequences by the efforts of MCMC and OHSU physicians and staff and the advanced technology they used to communicate with each other to start treatment quickly and send him on the road to recovery.

That road led initially to Portland and OHSU, but Hixson hasn't had to leave The Dalles for any care since then. Thanks to telemedicine technology, Hixson was seen by OHSU neurologist and stroke specialist Dr. Wayne Clark that night in the MCMC ER and has had follow-up care from the OHSU specialist without having to travel any farther than MCMC's Columbia Crest Clinic. MCMC staff have directed his rehabilitation in The Dalles.

More and more of the specialized care that Gorge-area patients previously could only find in Portland is now available in The Dalles, delivered either by OHSU physicians in local clinics or long distance via telemedicine technology. In addition to stroke care, telemedicine has previously been used during pediatric emergencies at MCMC,

and OHSU will soon expand its outpatient telemedicine services to include pediatric specialties and bariatrics.

Hixson benefited from the use of the technology not only to facilitate his quick diagnosis and initial treatment, but also for telemedicine follow-up visits with Dr. Clark.

"It sure made a world of difference to me," says the 76-year-old Hixson, a retired highway patrolman and sheriff's deputy. "It's not easy for me to travel, so I would have had to arrange special transportation if I had to keep going back to Portland."

While telemedicine certainly makes specialized care easier to access, convenience isn't the technology's No. 1 benefit. It can be a lifesaver. According to Dr. Clark the odds are definitely against patients who have stroke symptoms similar to Hixson's and don't receive timely care.

Unlike his patient, Dr. Clark vividly recalls the night he was beamed via technology into the MCMC ER and got the chance to exam Hixson as if he were in the same room. He could see his patient and the MCMC ER physician clearly, and they him, allowing them to communicate easily.

"Based on his exam and what I could see, I was able to pinpoint the stroke was caused by a clot in Mr. Hixson's brain stem," recalls Dr. Clark, who directs the Oregon Stroke Center at OHSU. "That is one of the worst strokes you can have. Without timely treatment the mortality rate can be as high as 70 percent."

Dr. Clark prescribed a clot-busting, brain-saving drug call t-PA immediately and initiated Hixson's rapid transfer to OHSU.

By the time Dr. Clark saw his patient in person, he was able to determine the clot already had begun to dissolve.

"Over the next few days Mr. Hixson showed great improvement," he says. "Considering the severity of the stroke, he has done really well."

One of the primary benefits of telemedicine, Dr. Clark says, is not only facilitating the rapid diagnosis and initial treatment of patients before transferring them to OHSU, it's also determining when a patient doesn't need to leave MCMC.

"About half of the time we can determine that a patient does not have to leave their community hospital," he says. "Prior to telemedicine, patients who arrived at smaller facilities like MCMC and needed highly specialized care almost automatically would have been transferred to Portland. Now that is often not necessary."

When transfers do occur, Dr. Clark adds, telemedicine also can help ease the anxiety of a patient's family members who have just watched their loved one loaded into an ambulance or LifeFlight and whisked out of town.

"This allows us to talk to family members, tell them what is going to be done when the patient arrives, get informed consent taken care of in advance," he says. "There is better continuity of care, and it's not as scary because the family knows where the patient is going, what is going to happen when he or she gets to OHSU. And they know who is going to be continuing the care, because it's the same physician who started it via telemedicine."