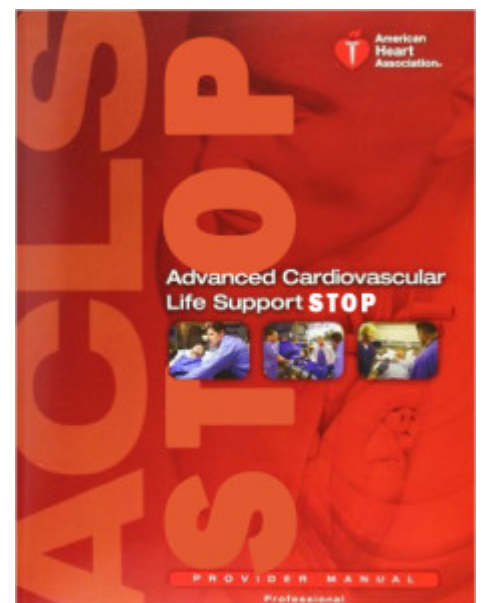


New STOP ACLS Algorithm Proven to Reduce Hospital Costs and Readmissions

JOPLIN, MO - New ACLS guidelines have been published that are anticipated to completely revolutionize the care given to patients in cardiac arrest. “The idea was originally brought to us by several on our administrative staff,” states Dr. Hart, president of [AHA](#). “They presented a case where a patient coded and no one knew what to do, so they just [pronounced the patient dead](#). On review, they realized they had saved both the hospital and the patient thousands of dollars! We saw their case and decided to study it formally.”

The pilot study was found to be so effective that it was ended early. The AHA is calling the results a “game-changer” for healthcare in the United States. The hospitals enrolled in the study were shocked to see their length of stays decrease dramatically.



In addition, there were zero hospital readmissions at 30 days. Dr. Grave of Big Town Hospital states, “This new treatment algorithm is so effective that many patients don’t require admission and are being ‘discharged’ from the ER!” The pilot study was halted after only 7 months due to its effectiveness, and an emergency council for updating the ACLS guidelines was called into session.

The new STOP algorithm is as follows:

S: See someone in cardiac arrest

T: Take their pulse

O: Observe until pulseless

P: Pronounce time of death

In an era of increasing cost and decreased reimbursements, the AHA is confident that these [new guidelines](#) will decrease costs of both patients and hospitals. “My OWN heart almost stopped after seeing these promising results!” exclaimed Dr. Hart.