Maps of Stroke and Stroke Centers for each Congressional District, 119th Congress

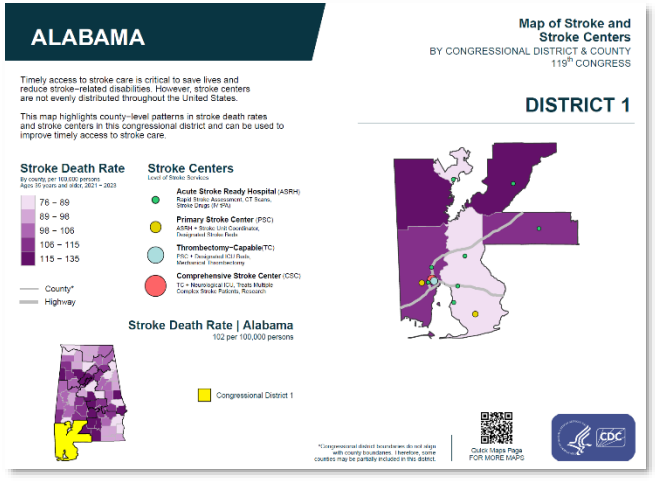
Each congressional district map displays county-level stroke death rates and the locations of stroke centers.

How to find the congressional district maps for your state

1. Scroll halfway down this webpage and click the Subseries: ***Congressional District Maps of Stroke and Stroke Centers by County***

2. Select the state of interest within the **Location** dropdown menu

3. Order your districts in numerical order by clicking **Relevance** and select **Title (A to Z)**.



U.S. CENTERS FOR DISEASE CONTROL AND PREVENTION

DIVISION OF HEART DISEASE AND STROKE PREVENTION

ALABAMA

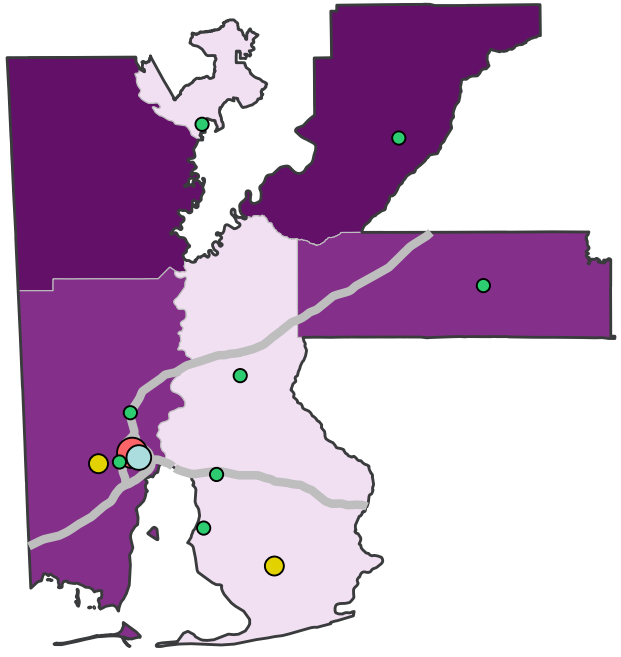
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

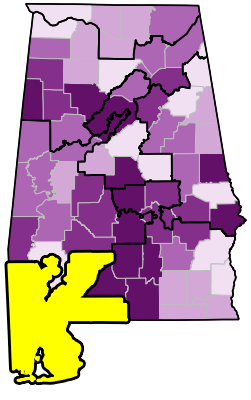
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 1

The map for Congressional District 1 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 121 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 12 stroke centers in District 1 (8 Acute, 2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253593

ALABAMA

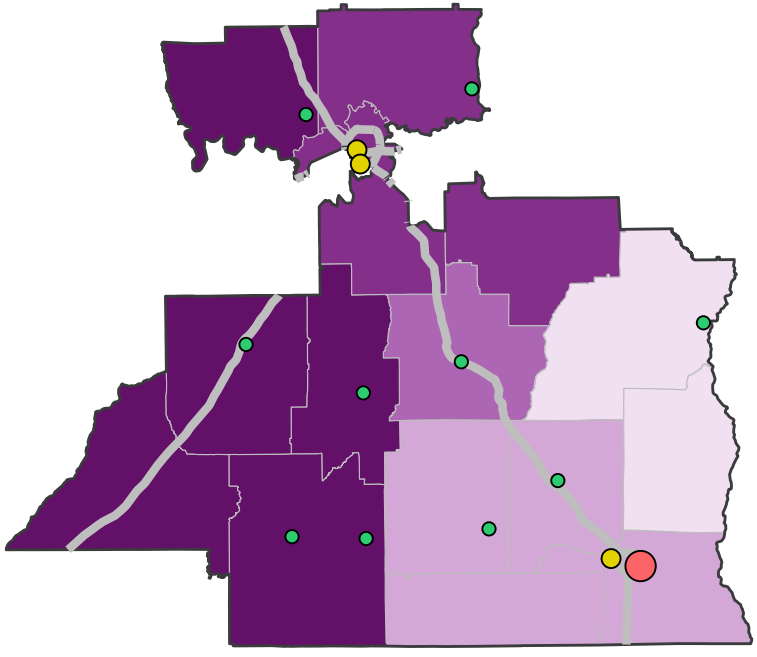
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

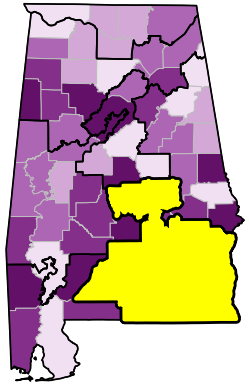
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 2

The map for Congressional District 2 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 129 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 14 stroke centers in District 2 (10 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253594

ALABAMA

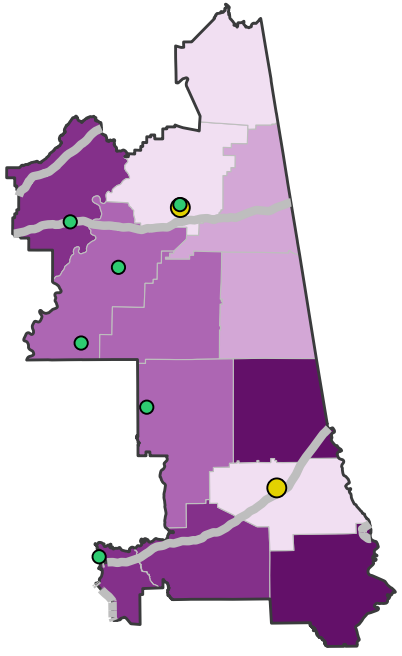
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

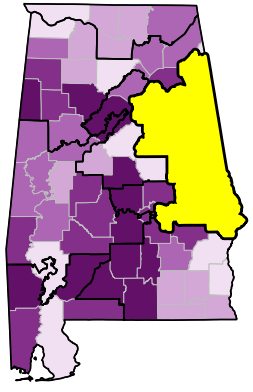
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 3

The map for Congressional District 3 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 135 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 3 (6 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253595

ALABAMA

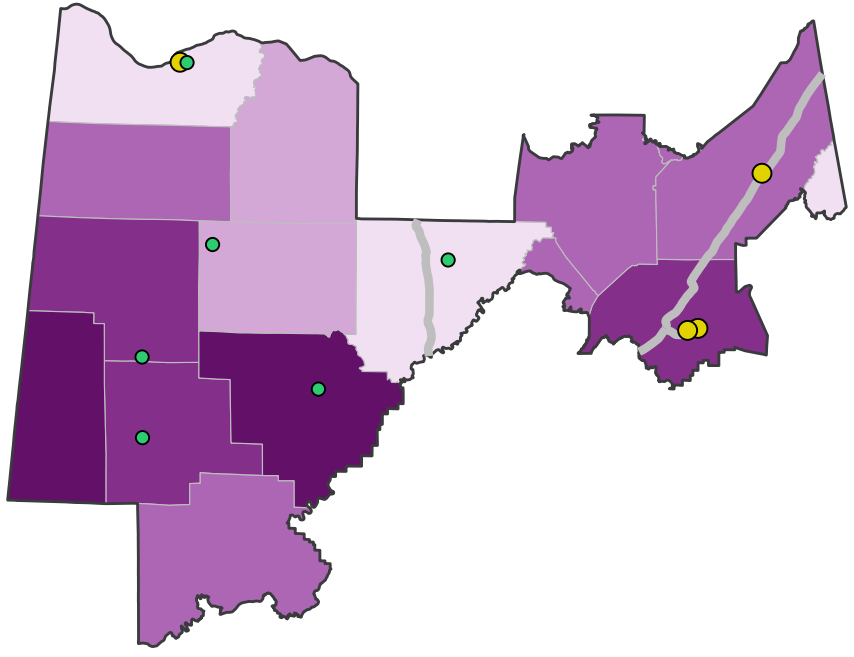
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

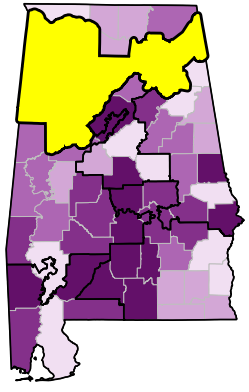
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 4

The map for Congressional District 4 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 84 − 116 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 4 (6 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253596

ALABAMA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

Stroke Centers

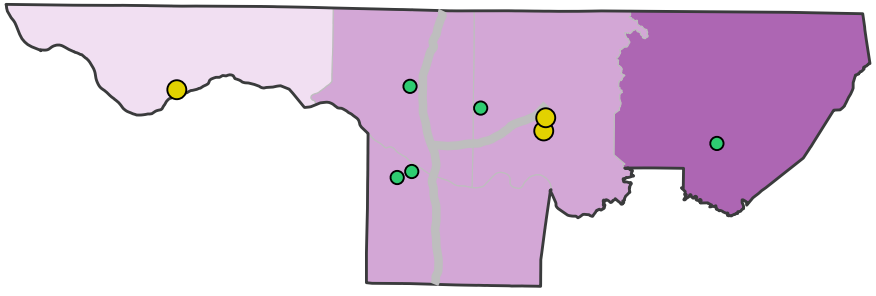
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

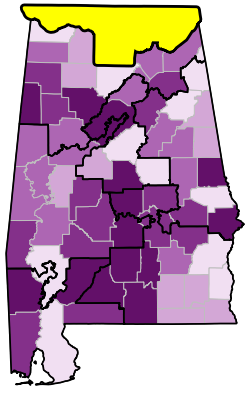
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 5

The map for Congressional District 5 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 84 − 99 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 5 (5 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253597

ALABAMA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

County*
Highway

Stroke Centers

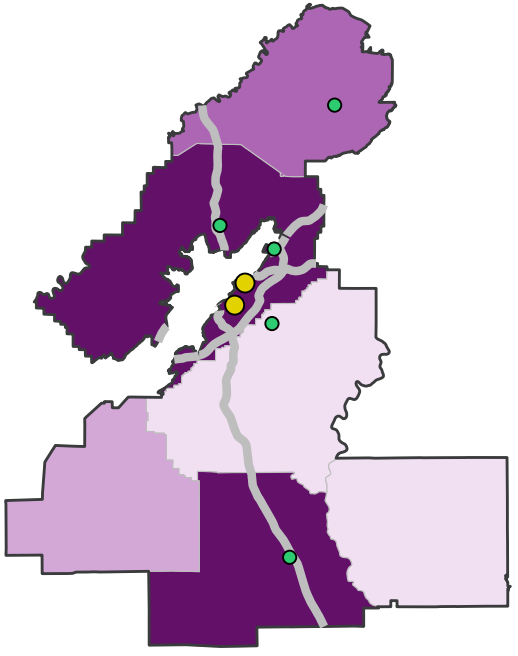
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

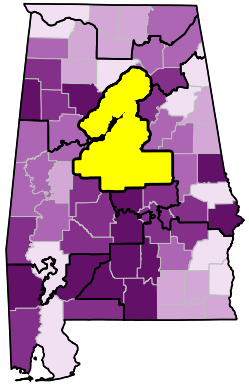
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 6

The map for Congressional District 6 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 118 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 6 (5 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253598

ALABAMA

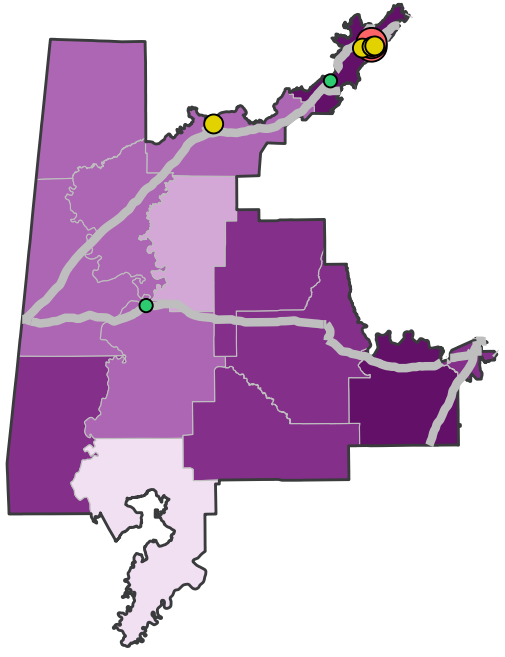
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 7



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 76 − 89
- 89 − 98
- 98 − 106
- 106 − 115
- 115 − 135

- County*
- Highway

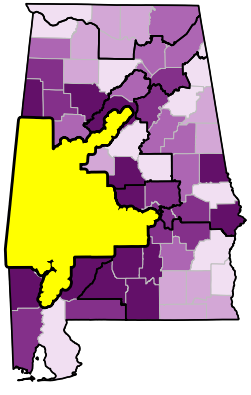
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Alabama

102 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ALABAMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alabama Congressional District 7

The map for Congressional District 7 in Alabama shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 84 − 117 per 100,000. For Alabama and the United States, stroke death rates are 102 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 7 (2 Acute, 4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253599

ALASKA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 19 − 44
- 44 − 58
- 58 − 78
- 78 − 82
- 82 − 165
- Insufficient Data
- County*
- Highway

Stroke Centers

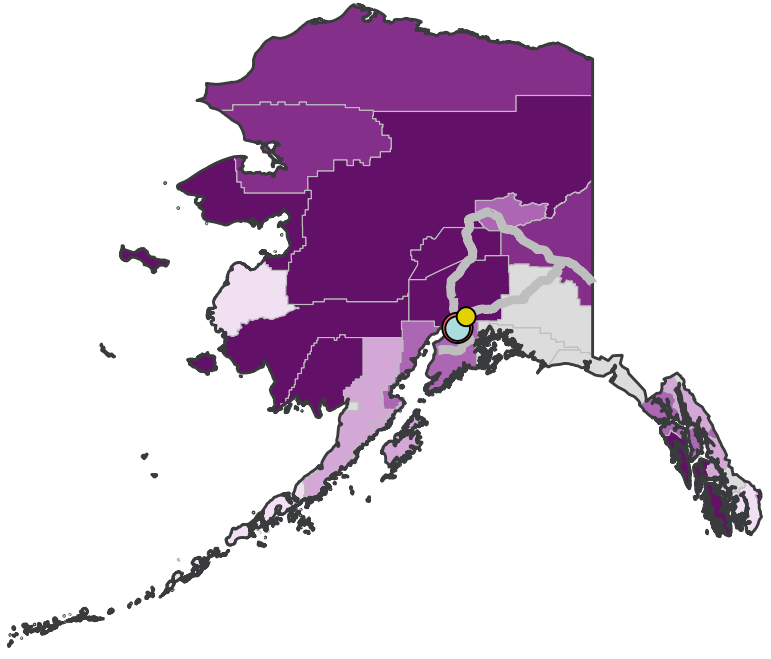
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Alaska

71 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

ALASKA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Alaska Congressional District 1

The map for Congressional District 1 in Alaska shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 19 − 165 per 100,000. For Alaska and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253600

ARIZONA

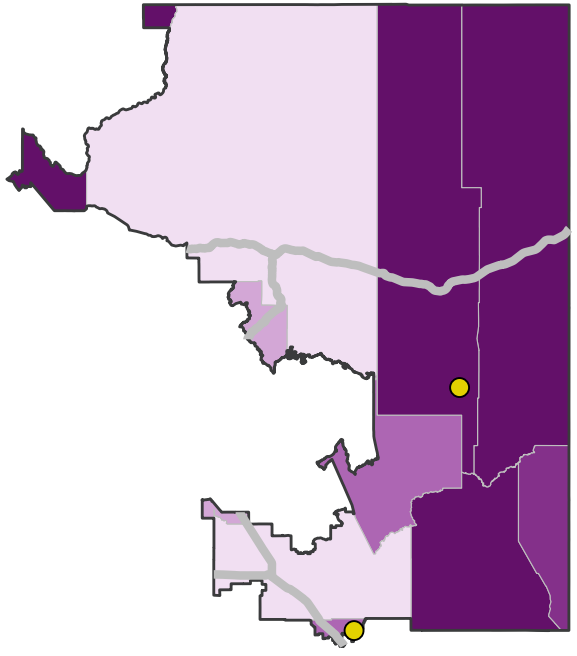
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

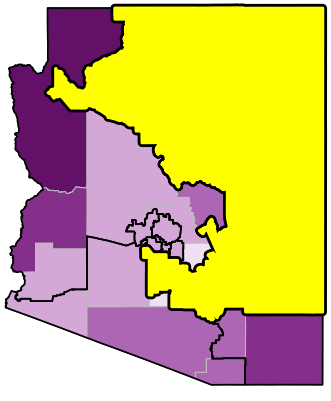
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 1

The map for Congressional District 1 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 101 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 1 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253601

ARIZONA

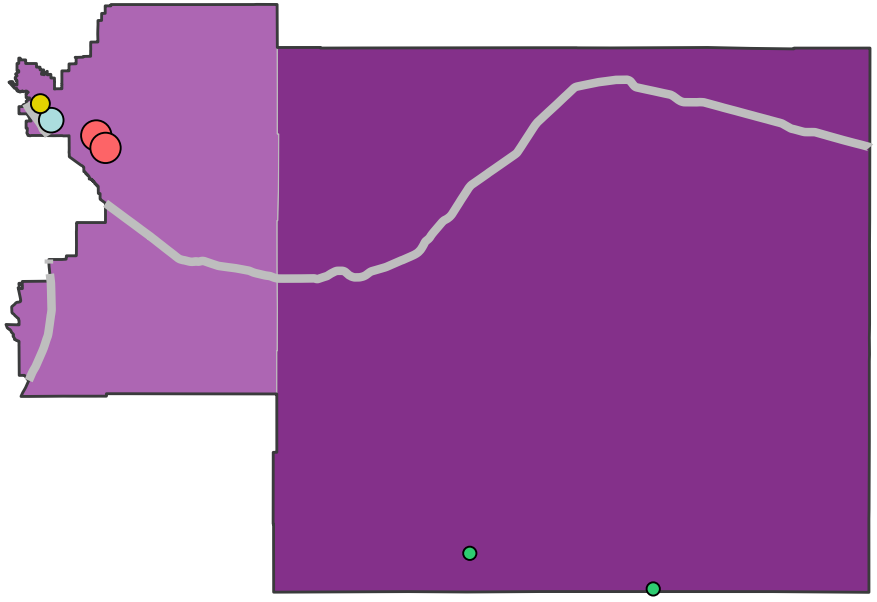
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

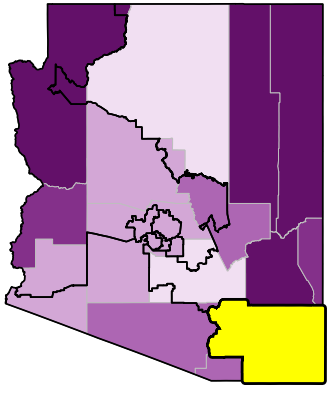
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 2

The map for Congressional District 2 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 72 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (2 Acute, 1 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253602

ARIZONA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

Stroke Centers

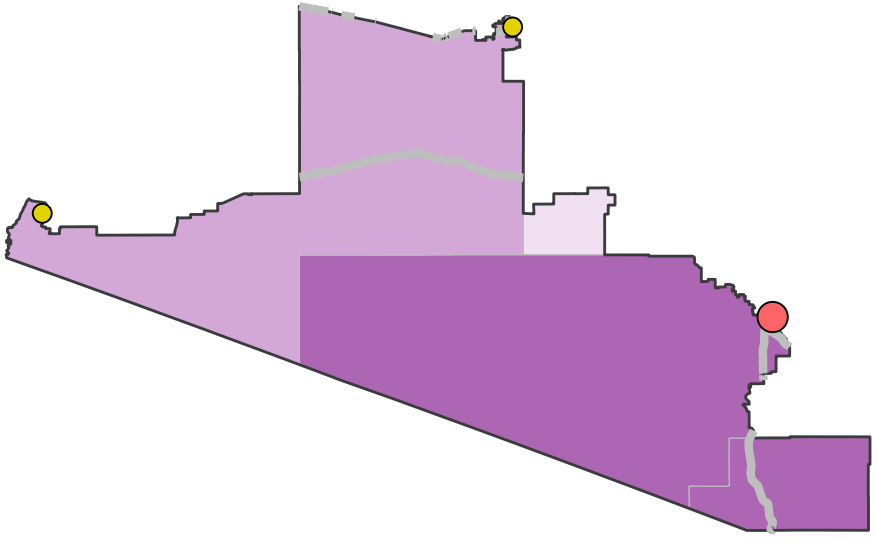
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

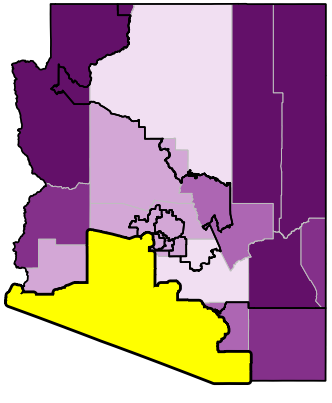
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 3

The map for Congressional District 3 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 71 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 3 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253603

ARIZONA

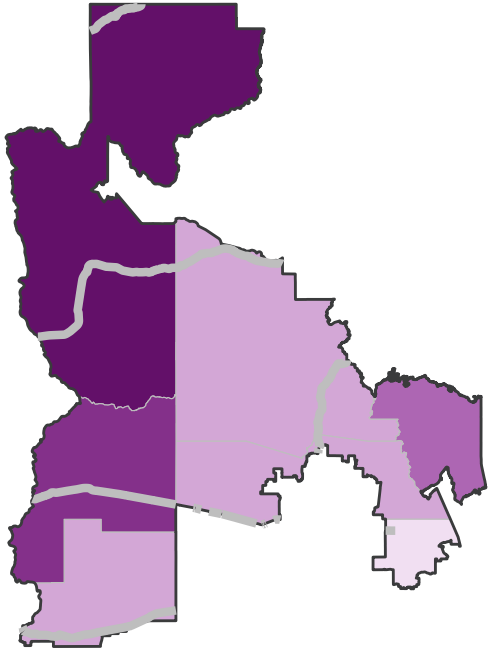
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

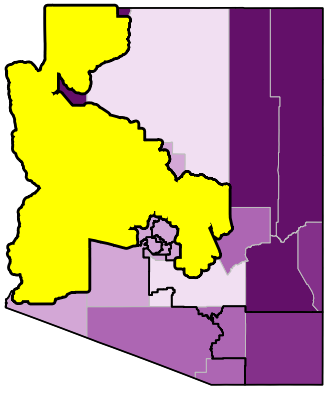
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 4

The map for Congressional District 4 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 77 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 4 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253604

ARIZONA

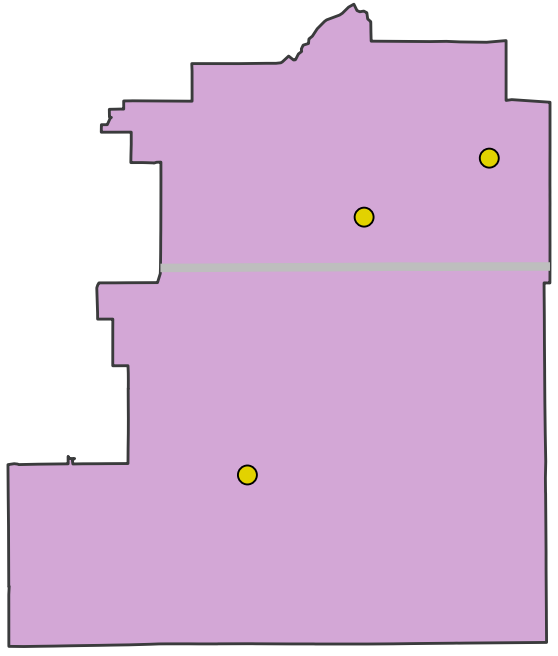
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

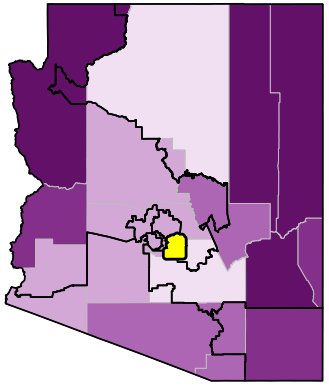
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 5

The map for Congressional District 5 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for Maricopa County, the single county represented in the district, is 66 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 5 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253605

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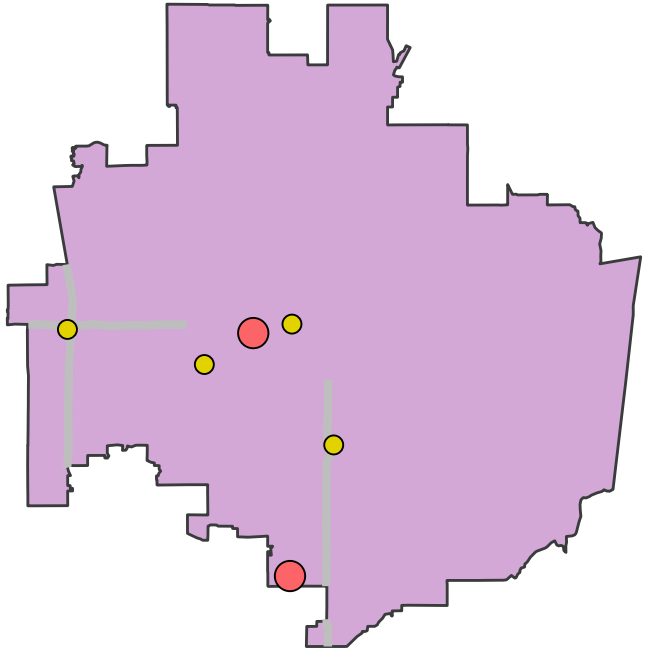
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

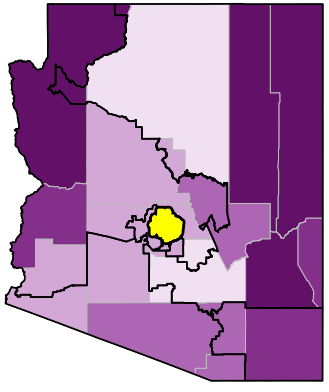
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 6

The map for Congressional District 6 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for Maricopa County, the single county represented in the district, is 66 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253606

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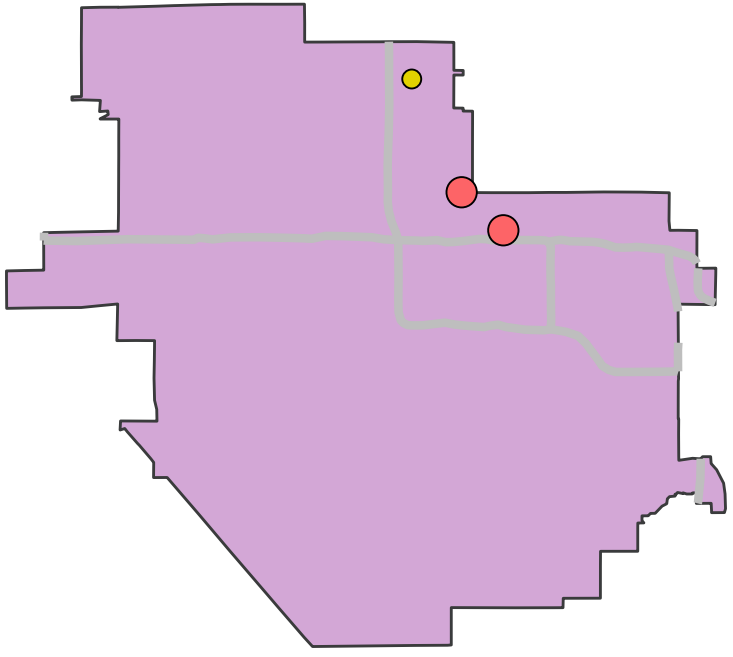
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

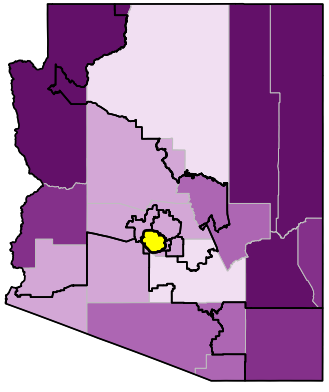
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 7

The map for Congressional District 7 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for Maricopa County, the single county represented in the district, is 66 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 7 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253607

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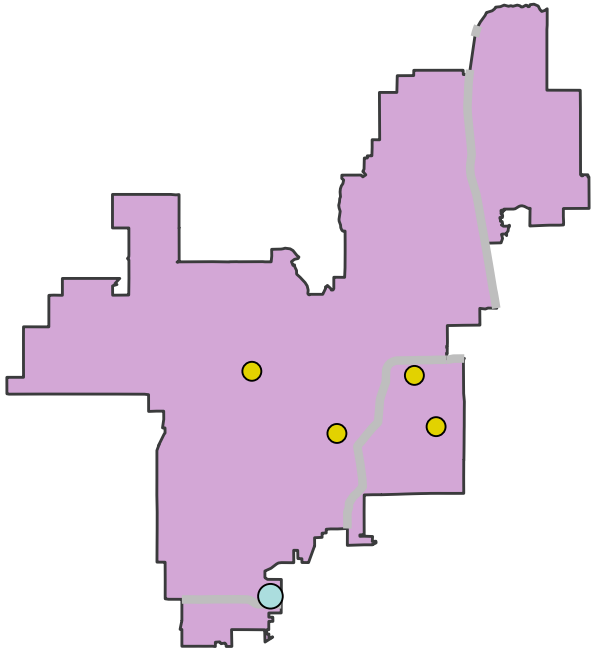
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

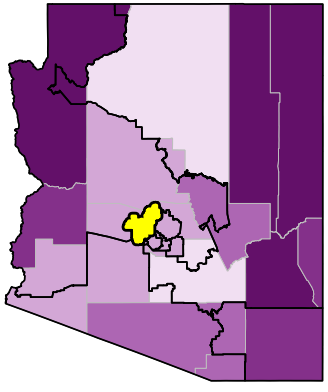
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 8

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 8

The map for Congressional District 8 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for Maricopa County, the single county represented in the district, is 66 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 8 (4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253608

ARIZONA

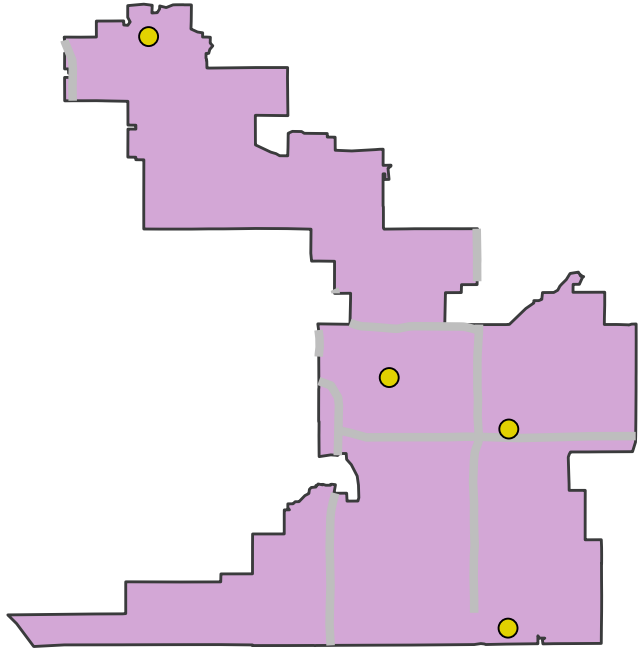
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 67
- 67 − 72
- 72 − 77
- 77 − 101

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

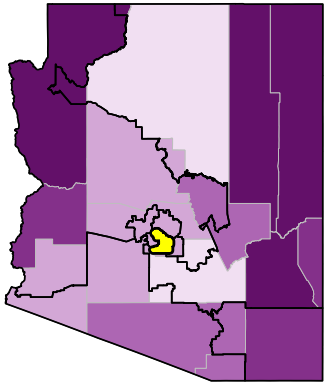
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arizona

71 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARIZONA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arizona Congressional District 9

The map for Congressional District 9 in Arizona shows that stroke death rates (ages 35+, 2021 − 2023) for Maricopa County, the single county represented in the district, is 66 per 100,000. For Arizona and the United States, stroke death rates are 71 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 9 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253609

ARKANSAS

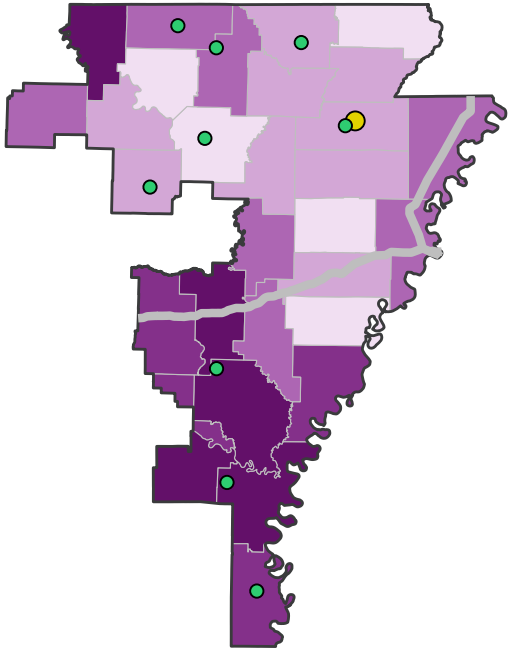
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 67 − 82
- 82 − 94
- 94 − 103
- 103 − 111
- 111 − 133

- County*
- Highway

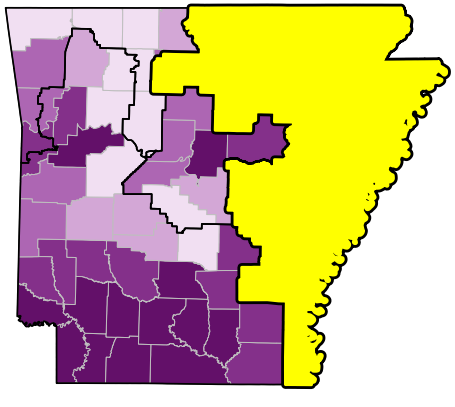
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arkansas

98 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARKANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arkansas Congressional District 1

The map for Congressional District 1 in Arkansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 133 per 100,000. For Arkansas and the United States, stroke death rates are 98 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 1 (9 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253610

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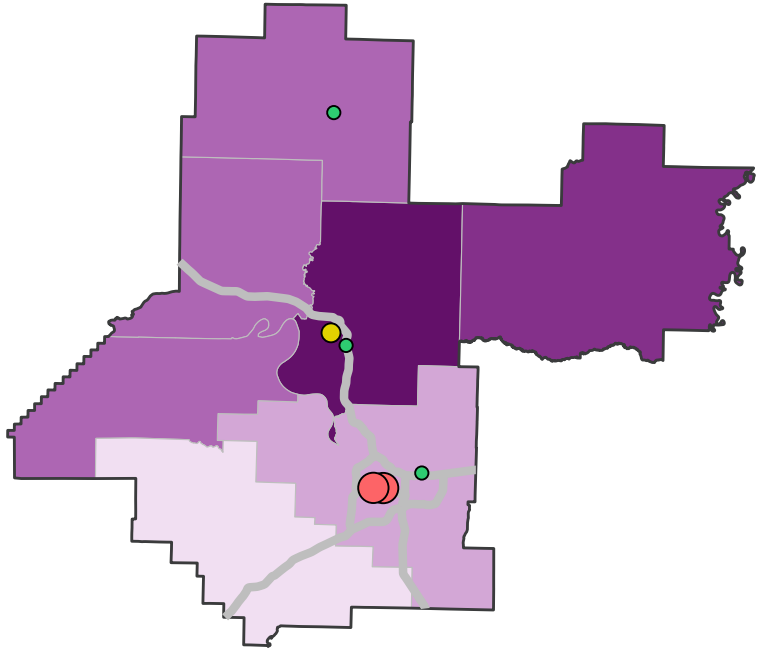
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 67 − 82
- 82 − 94
- 94 − 103
- 103 − 111
- 111 − 133

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

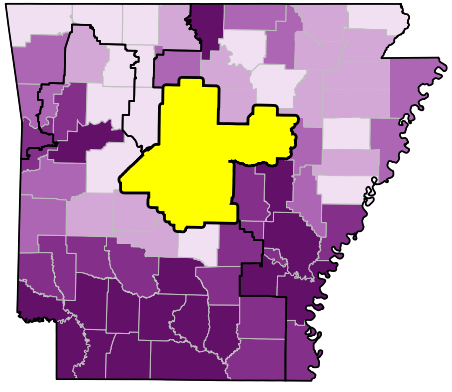
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arkansas

98 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

ARKANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arkansas Congressional District 2

The map for Congressional District 2 in Arkansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 115 per 100,000. For Arkansas and the United States, stroke death rates are 98 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (3 Acute, 1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253611

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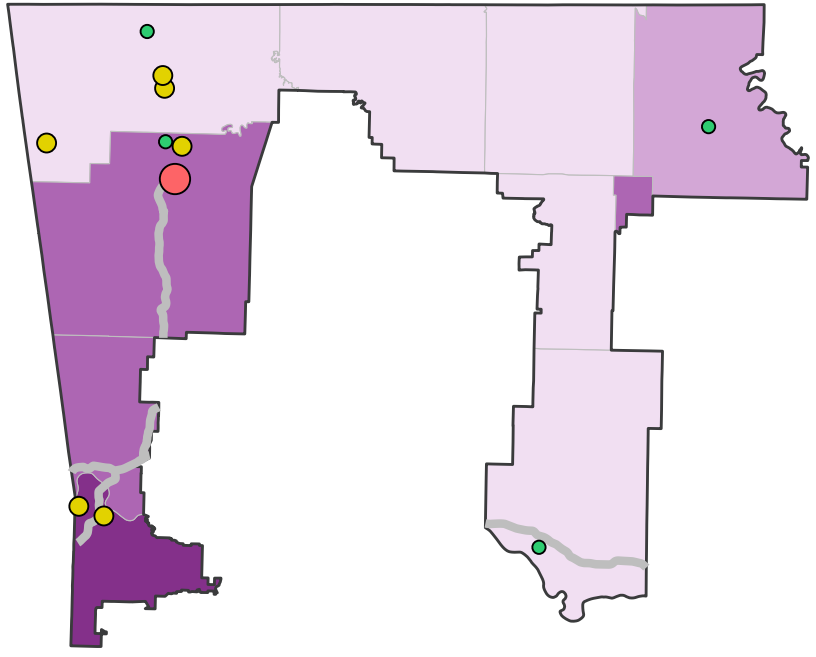
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 67 − 82
- 82 − 94
- 94 − 103
- 103 − 111
- 111 − 133

- County*
- Highway

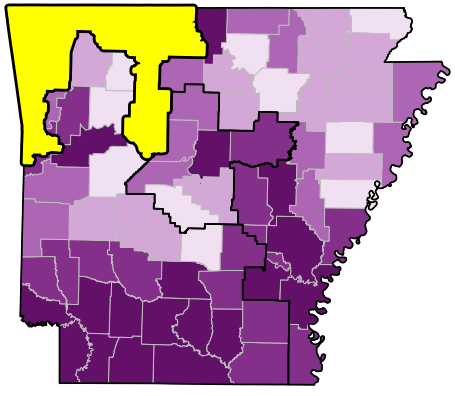
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arkansas

98 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARKANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arkansas Congressional District 3

The map for Congressional District 3 in Arkansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 108 per 100,000. For Arkansas and the United States, stroke death rates are 98 and 80 per 100,000, respectively.

There are a total of 11 stroke centers in District 3 (4 Acute, 6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253612

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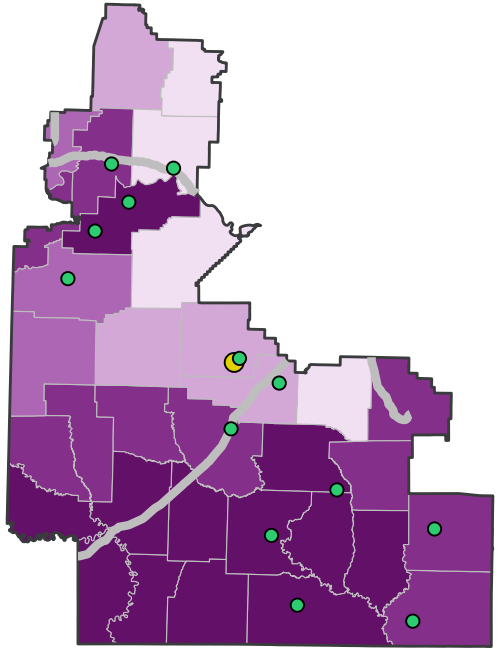
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 67 − 82
- 82 − 94
- 94 − 103
- 103 − 111
- 111 − 133

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

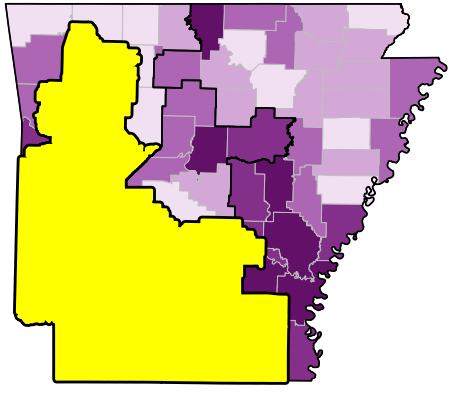
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Arkansas

98 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ARKANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Arkansas Congressional District 4

The map for Congressional District 4 in Arkansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 131 per 100,000. For Arkansas and the United States, stroke death rates are 98 and 80 per 100,000, respectively.

There are a total of 14 stroke centers in District 4 (13 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253613

CALIFORNIA

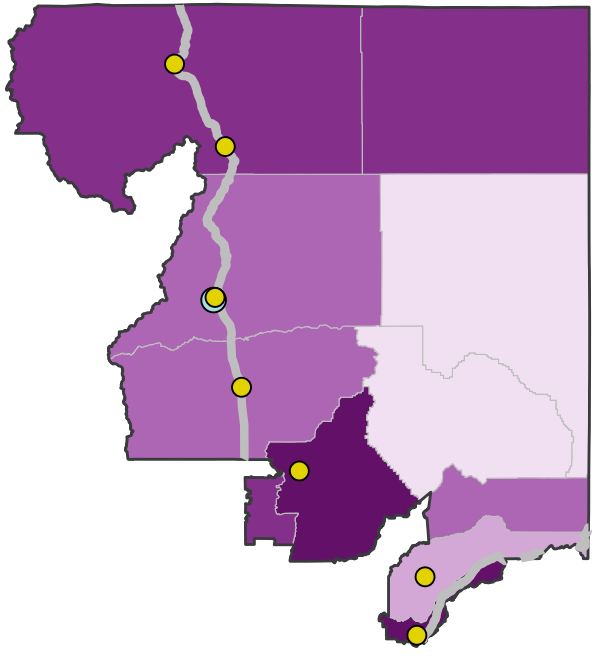
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

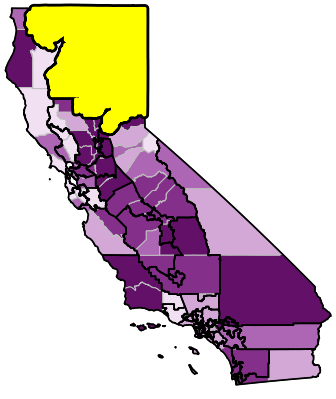
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 1

The map for Congressional District 1 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 110 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 1 (7 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253614

CALIFORNIA

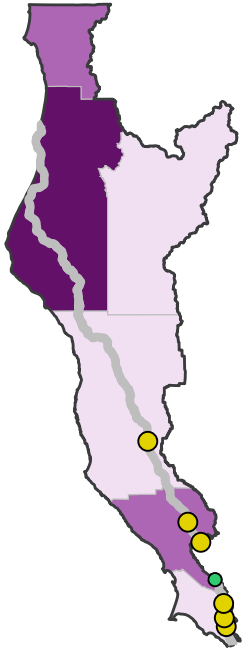
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

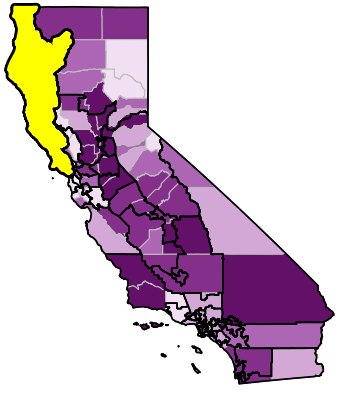
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 2

The map for Congressional District 2 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 50 − 162 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 2 (1 Acute, 6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253615

CALIFORNIA

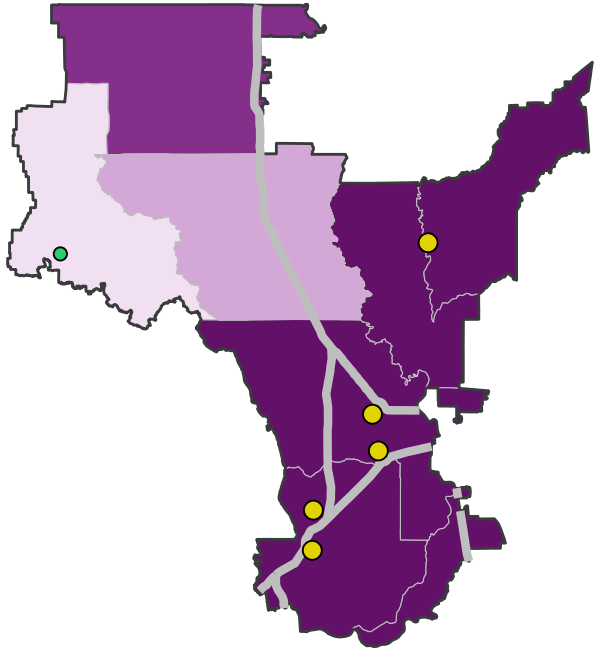
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

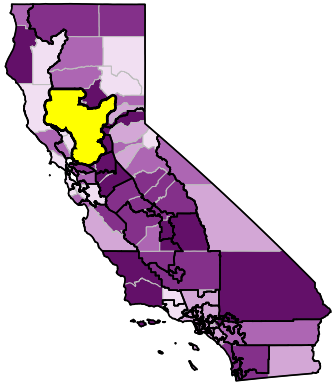
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 3

The map for Congressional District 3 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 144 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253616

CALIFORNIA

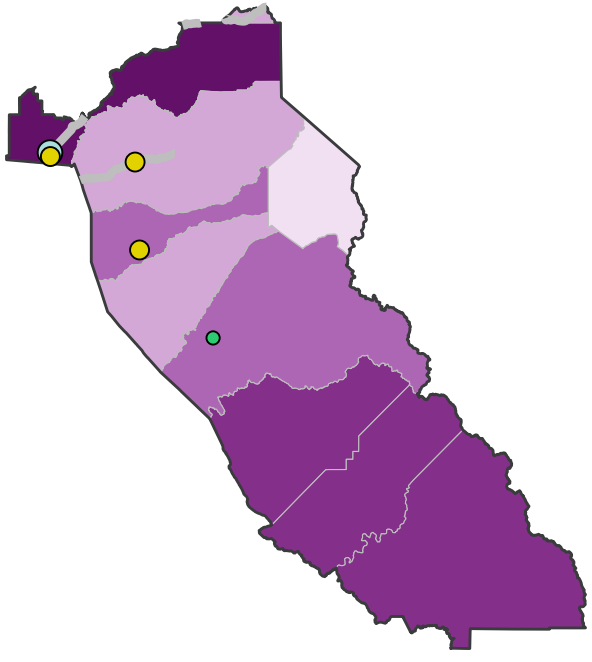
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

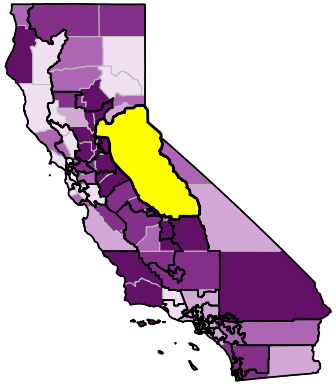
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 4

The map for Congressional District 4 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 66 − 110 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (1 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253617

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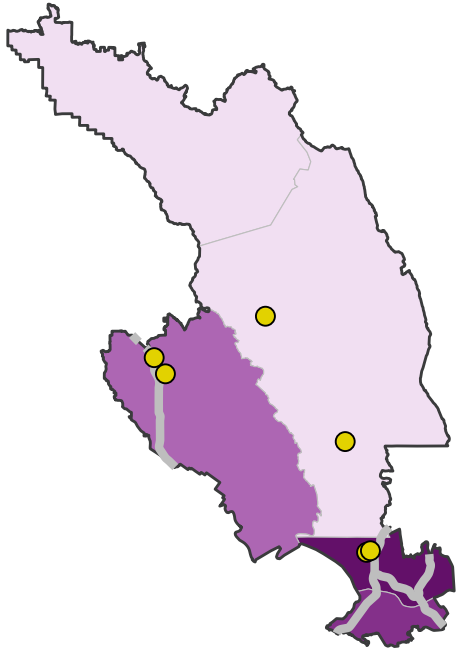
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

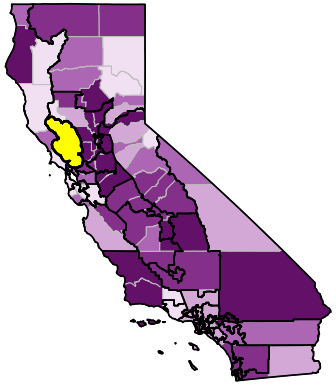
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 5

The map for Congressional District 5 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 110 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 5 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253618

CALIFORNIA

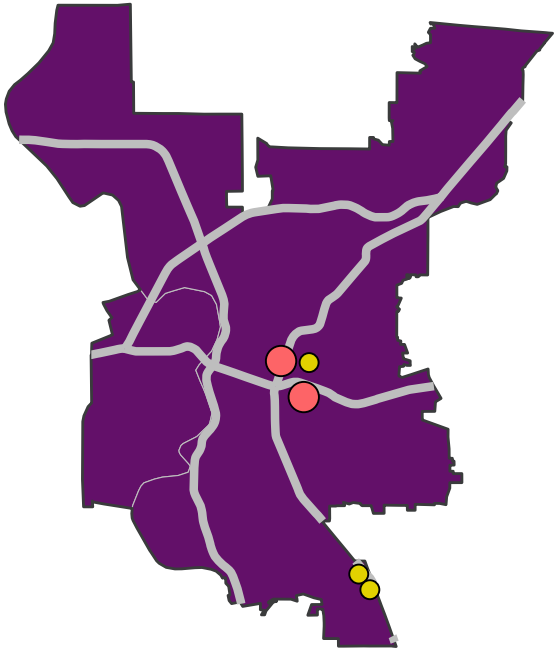
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

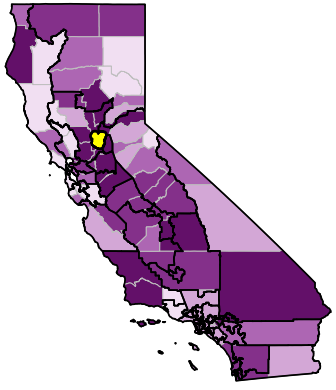
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 6

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 6

The map for Congressional District 6 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 96 − 104 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253619

CALIFORNIA

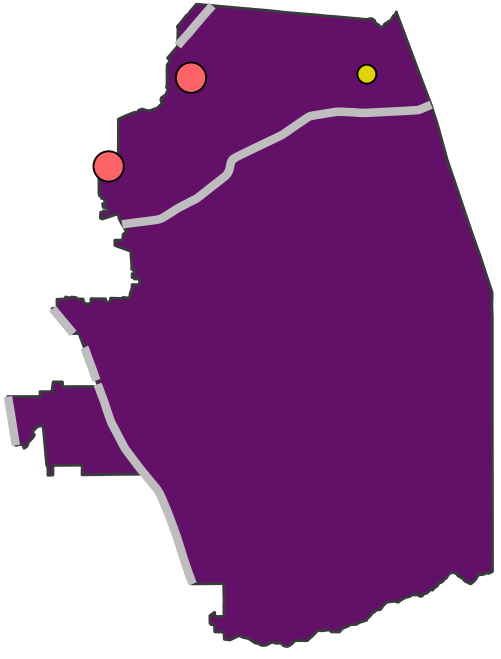
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

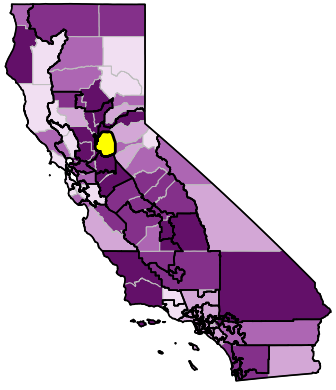
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ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 7

The map for Congressional District 7 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Sacramento County, the single county represented in the district, is 104 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 7 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253620

CALIFORNIA

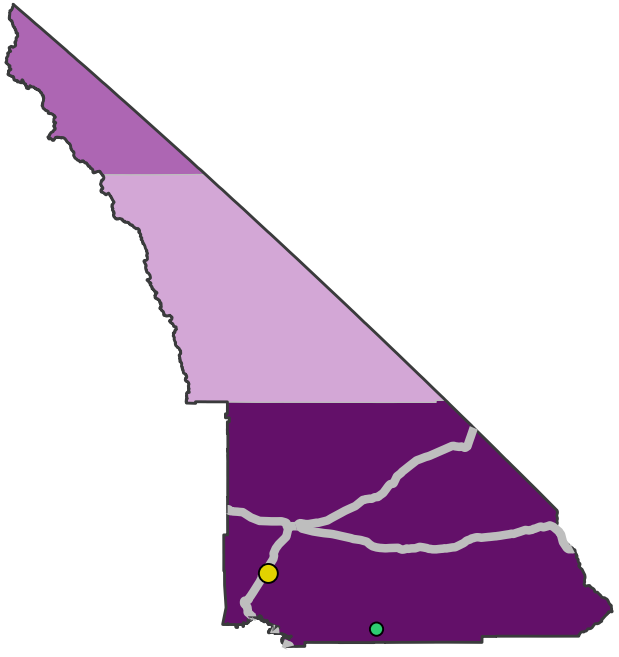
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

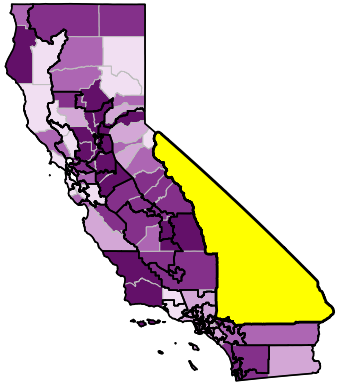
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 8

The map for Congressional District 8 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 88 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 8 (1 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253621

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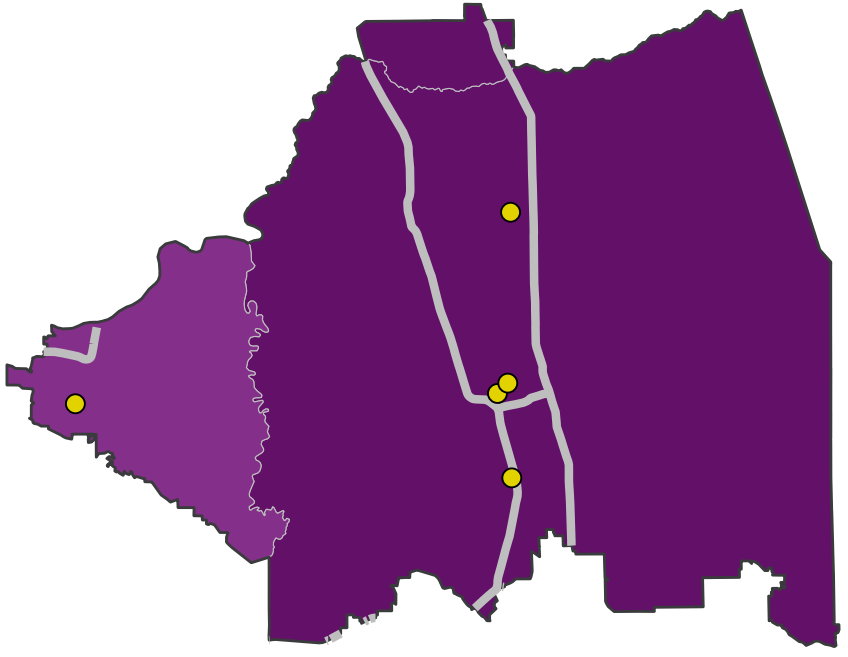
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

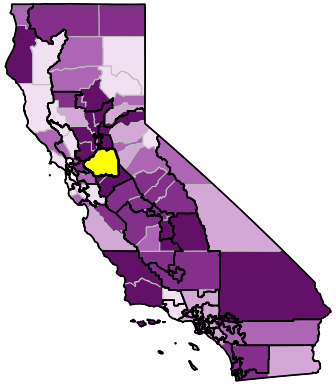
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 9

The map for Congressional District 9 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 104 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 9 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253622

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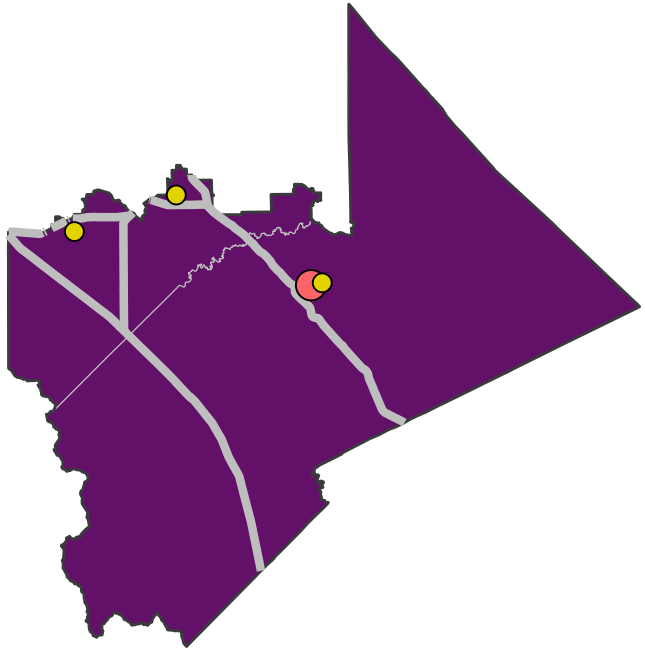
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

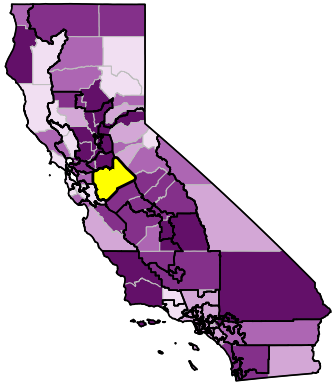
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 10

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 10

The map for Congressional District 10 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 91 − 94 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 10 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253623

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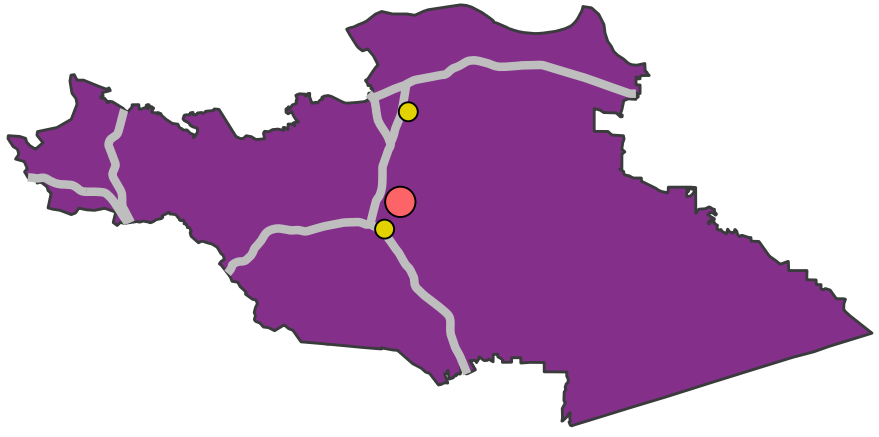
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

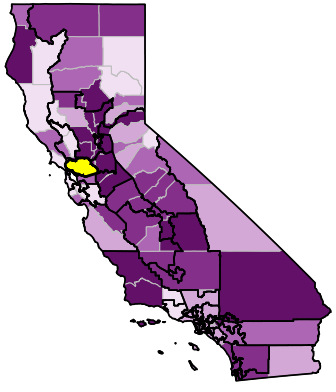
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 11

The map for Congressional District 11 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Contra Costa County, the single county represented in the district, is 86 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 11 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253624

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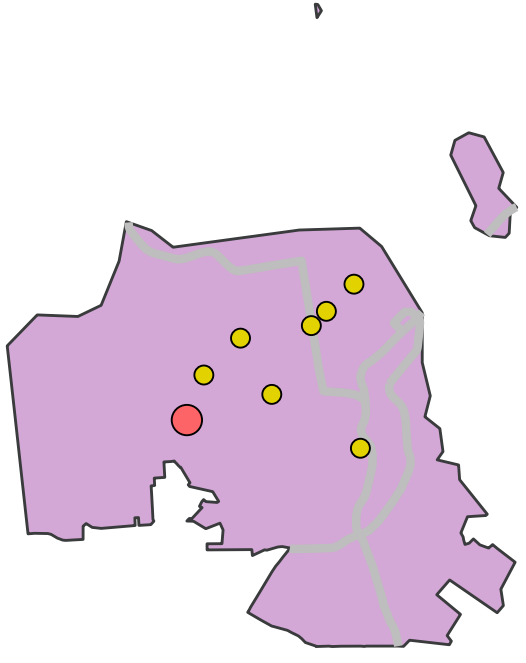
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

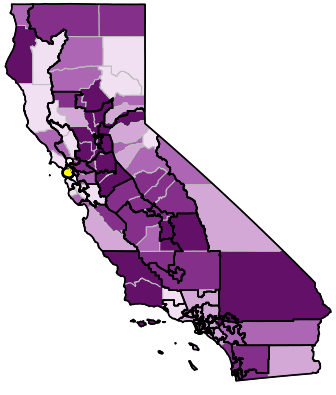
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 12

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 12

The map for Congressional District 12 in California shows that stroke death rates (ages 35+, 2021 − 2023) for San Francisco County, the single county represented in the district, is 69 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 12 (7 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253625

CALIFORNIA

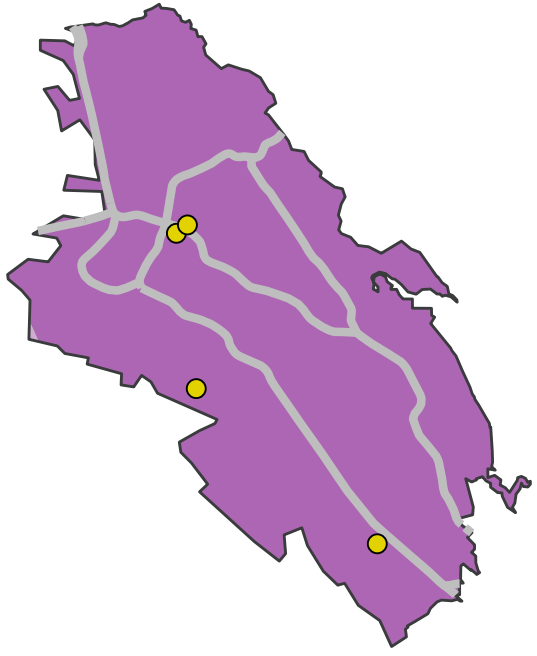
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

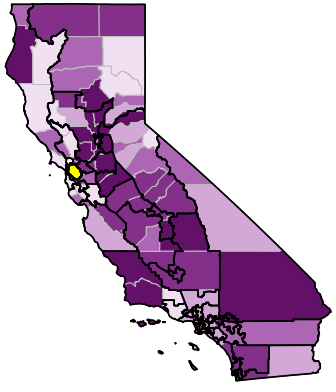
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 13

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 13

The map for Congressional District 13 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 79 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 13 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253626

CALIFORNIA

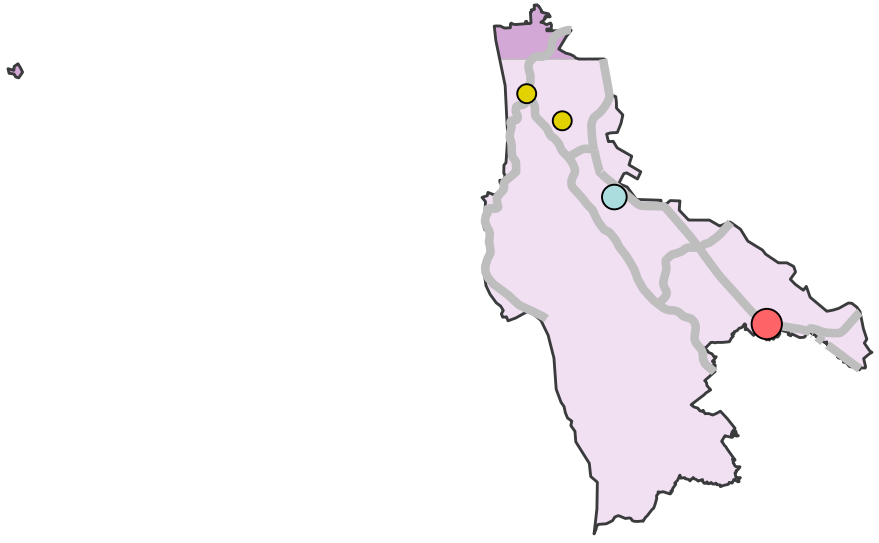
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

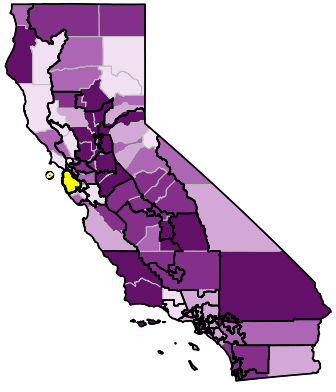
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 14

The map for Congressional District 14 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 69 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 14 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253627

CALIFORNIA

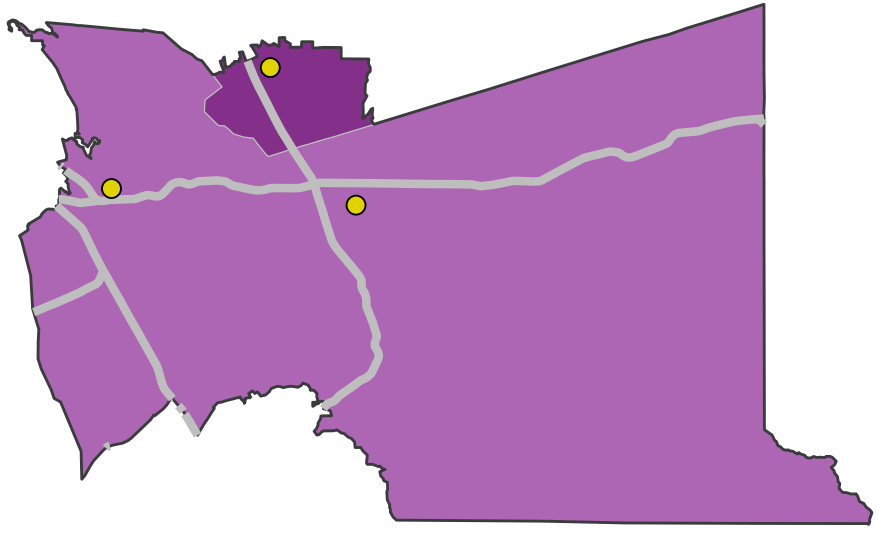
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 15



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

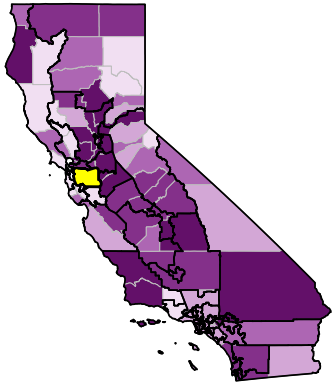
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 15

The map for Congressional District 15 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 86 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 15 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253628

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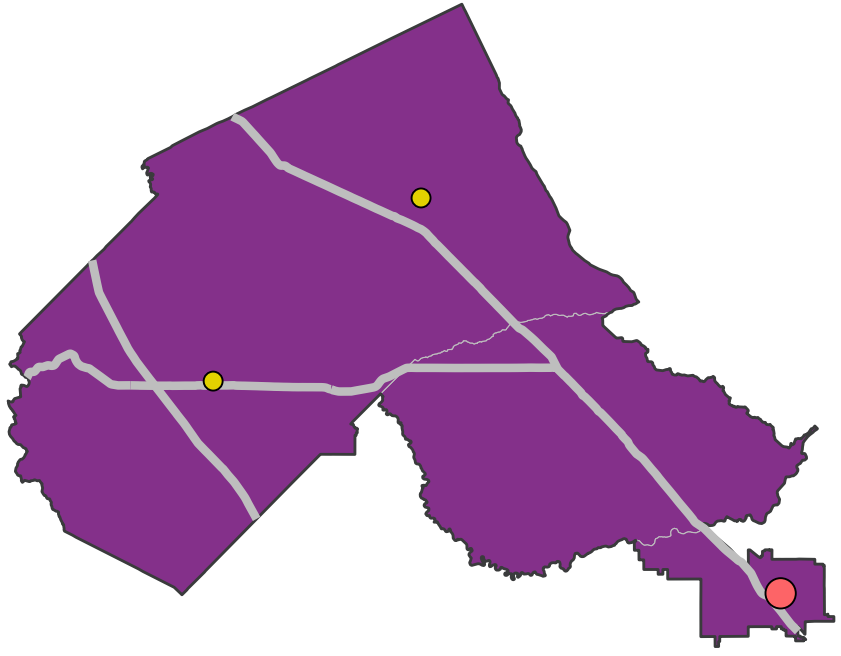
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 16



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

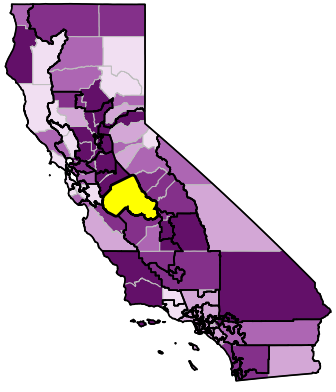
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 16

The map for Congressional District 16 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 86 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 16 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253629

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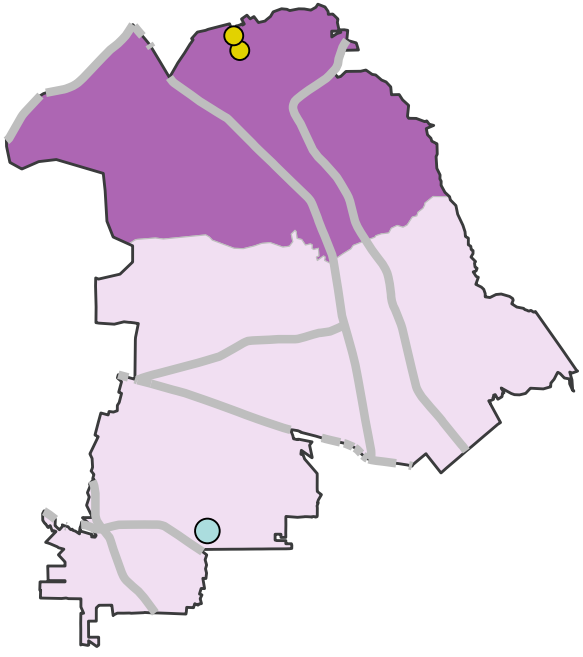
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 17

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

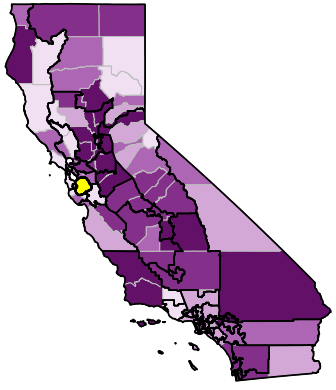
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 17

The map for Congressional District 17 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 79 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 17 (2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253630

CALIFORNIA

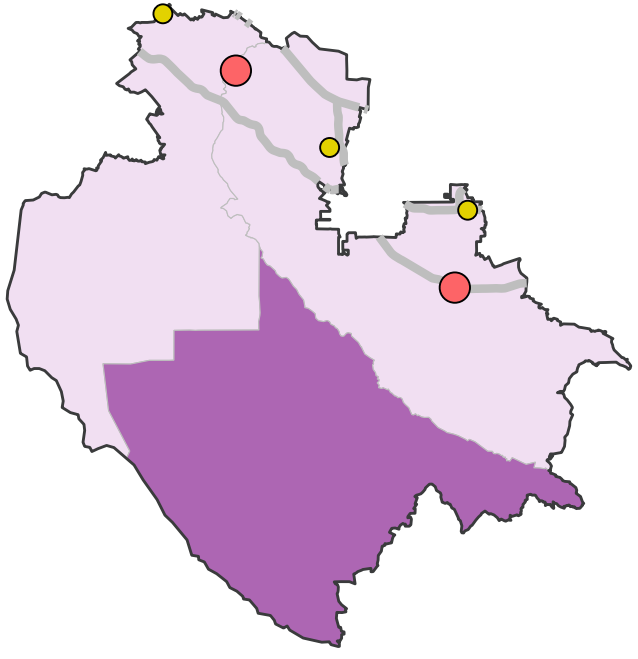
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 18

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

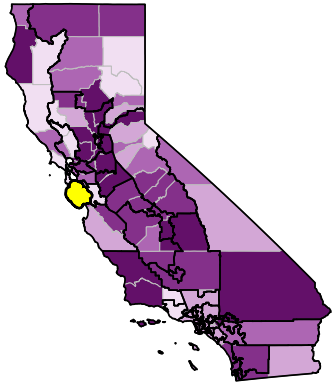
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 18

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 18

The map for Congressional District 18 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 77 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 18 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253631

CALIFORNIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 19

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

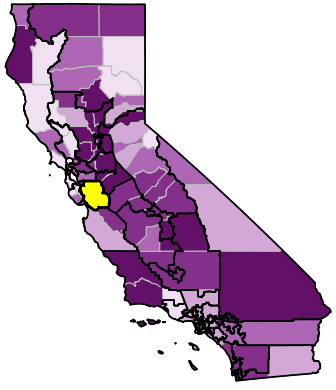
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 19

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 19

The map for Congressional District 19 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Santa Clara County, the single county represented in the district, is 63 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 19 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253632

CALIFORNIA

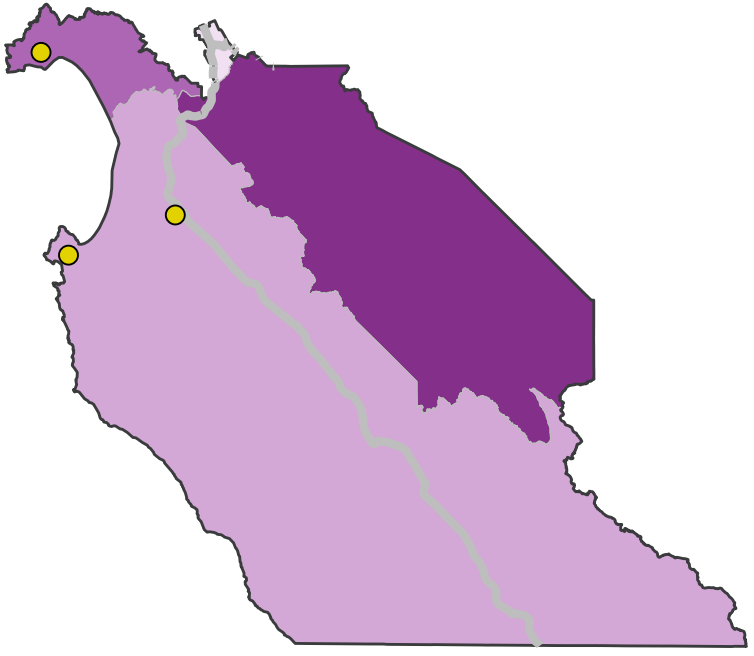
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 20

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

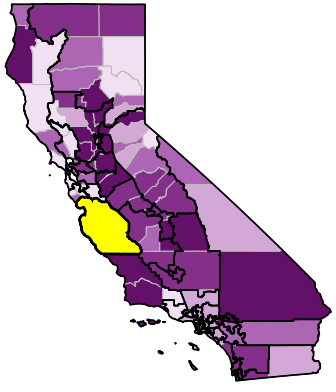
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 20

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 20

The map for Congressional District 20 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 83 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 20 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253633

CALIFORNIA

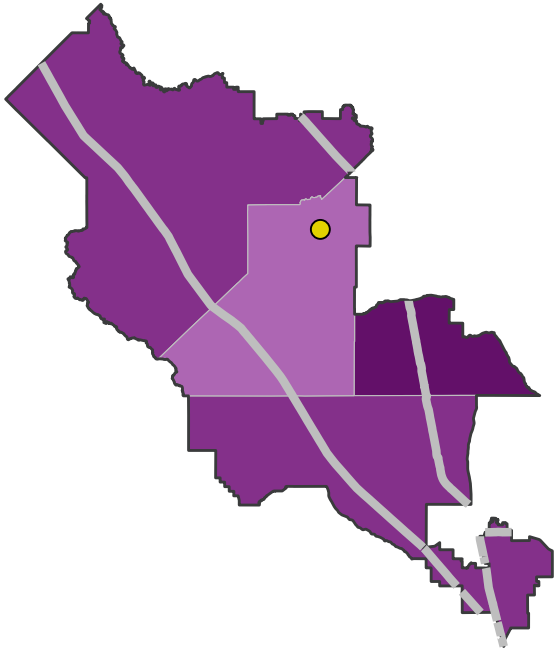
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 21

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

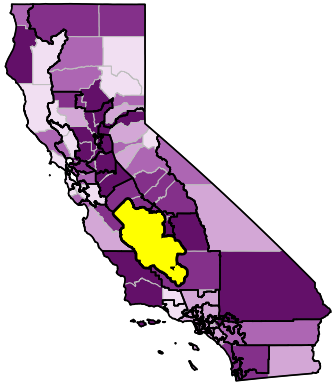
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 21

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 21

The map for Congressional District 21 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 87 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There is only 1 stroke center in District 21 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253634

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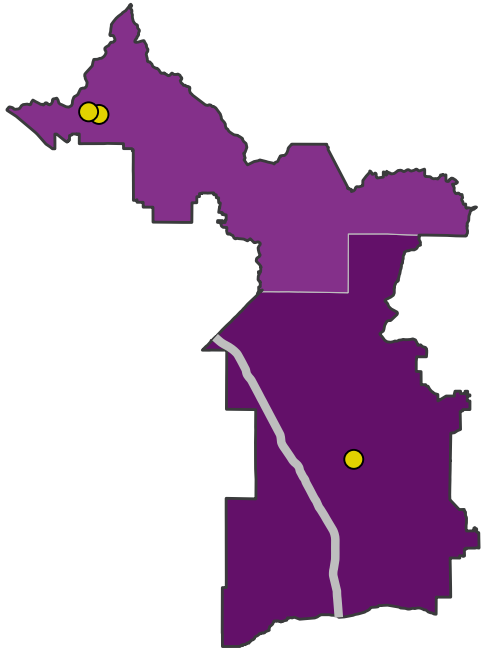
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 22

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

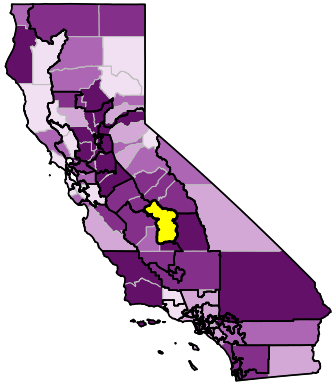
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 22

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 22

The map for Congressional District 22 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 87 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 22 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253635

CALIFORNIA

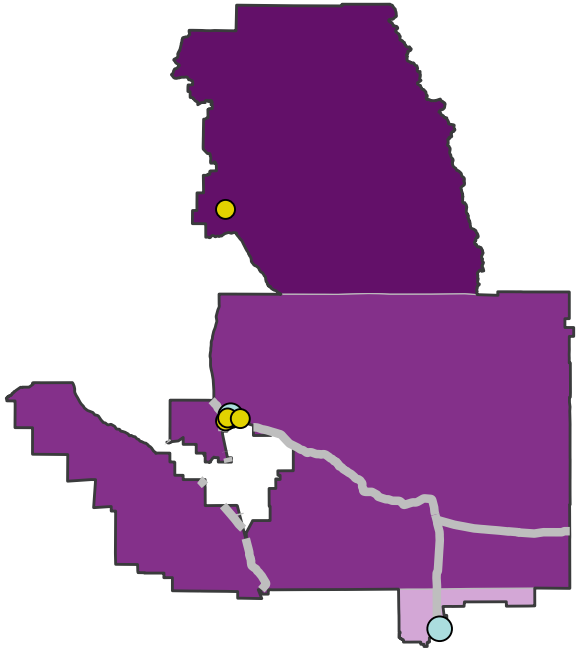
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 23

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

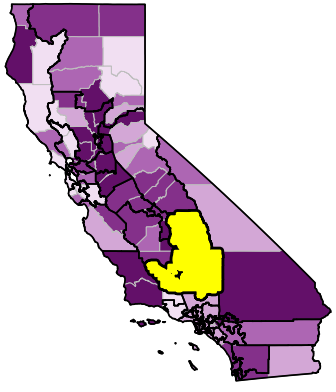
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 23

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 23

The map for Congressional District 23 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 87 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 23 (4 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253636

CALIFORNIA

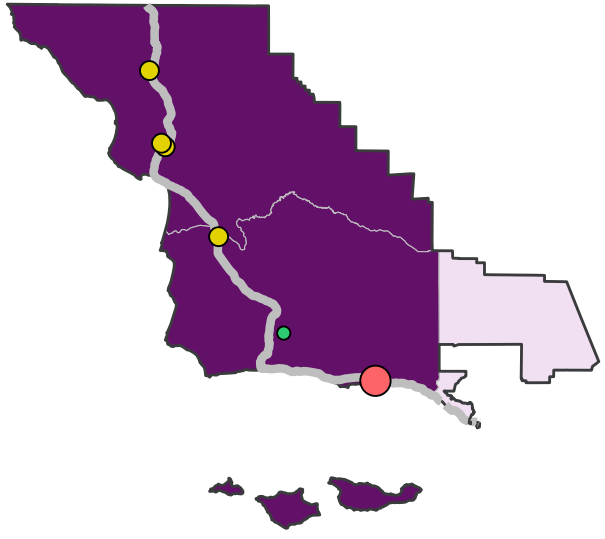
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 24

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

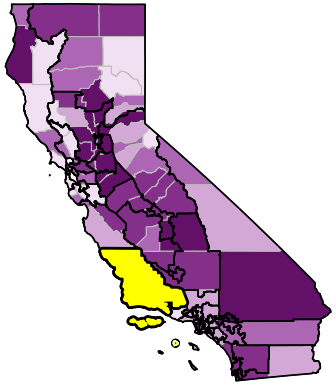
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 24

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 24

The map for Congressional District 24 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 119 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 24 (1 Acute, 4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253637

CALIFORNIA

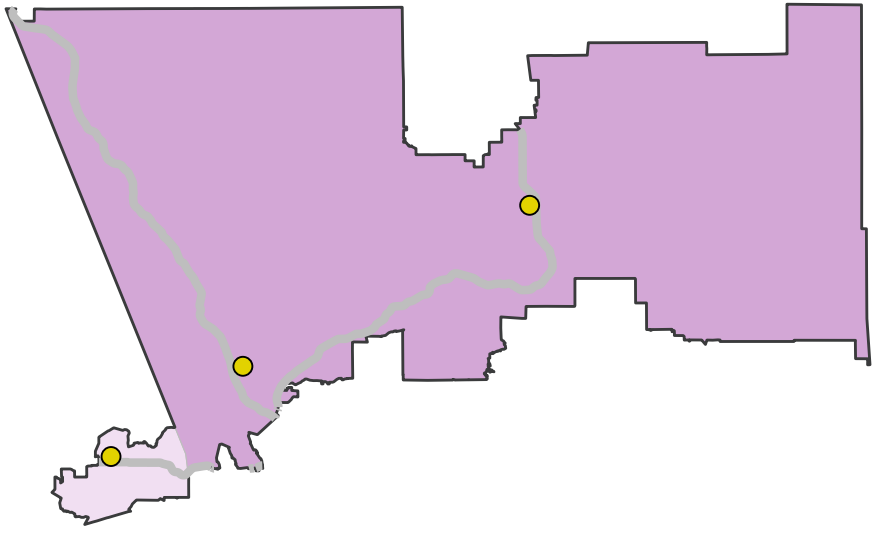
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 25



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

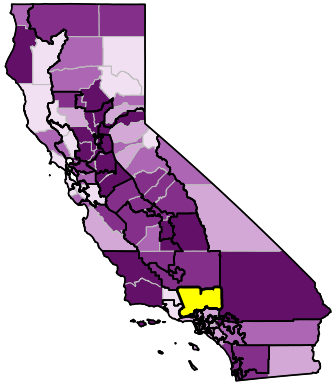
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 25

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 25

The map for Congressional District 25 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 25 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253638

CALIFORNIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 26

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

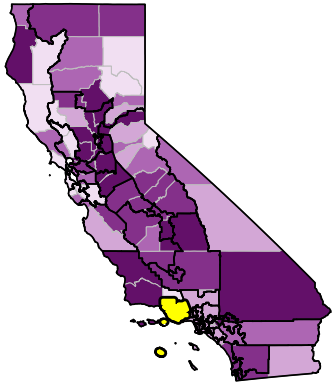
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

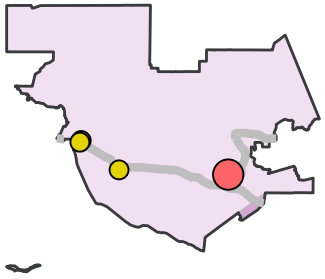
Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 26





*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 26

The map for Congressional District 26 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 26 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253639

CALIFORNIA

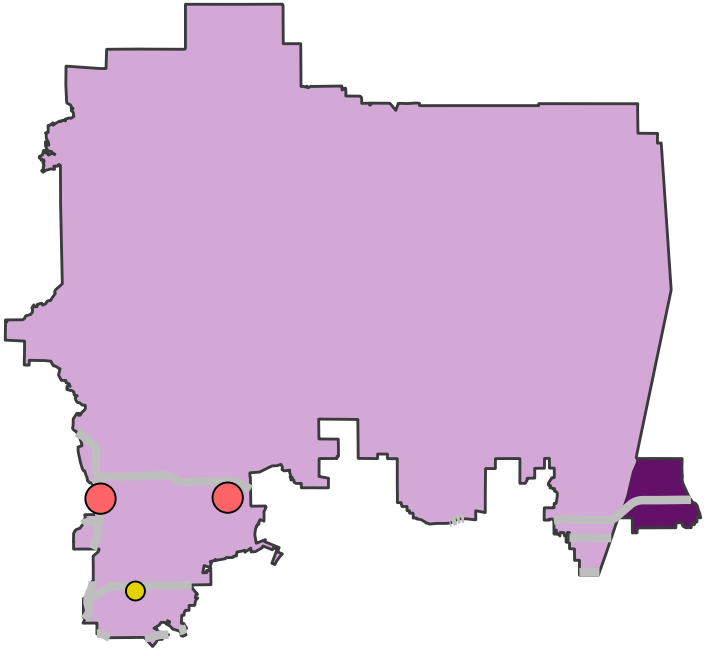
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 27



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

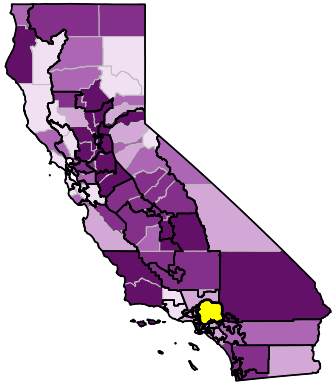
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 27

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 27

The map for Congressional District 27 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 88 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 27 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253640

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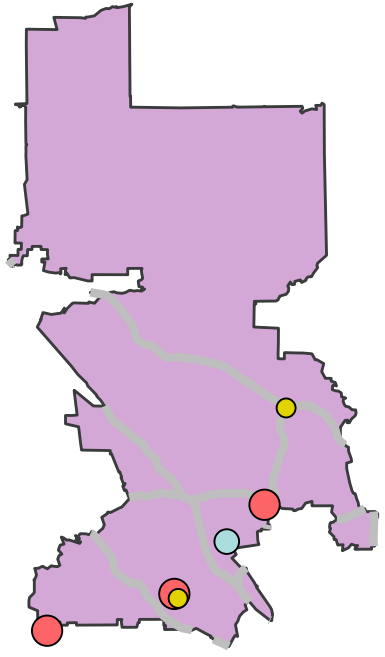
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 28

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

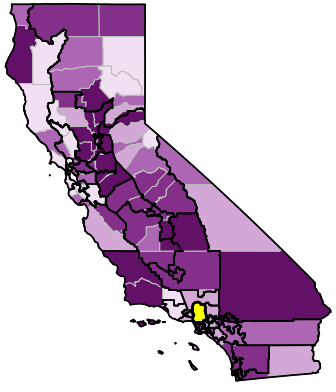
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 28

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 28

The map for Congressional District 28 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 28 (2 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253641

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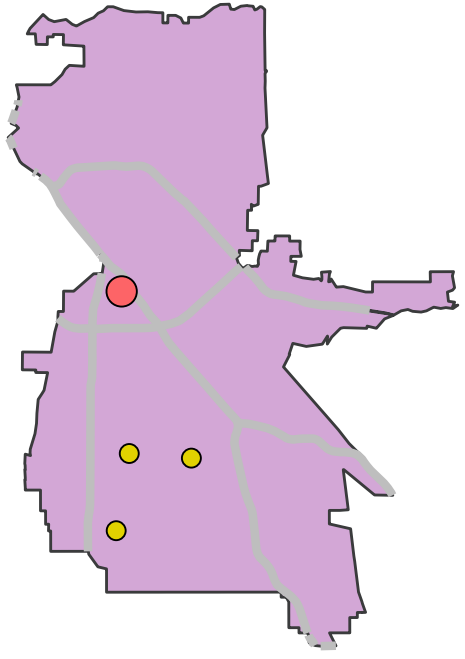
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 29

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

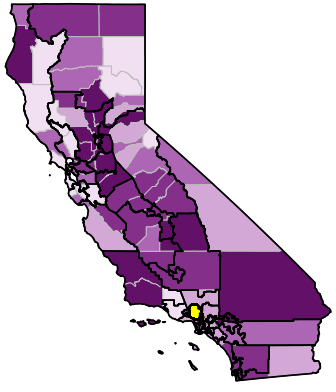
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 29

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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There are a total of 4 stroke centers in District 29 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253642

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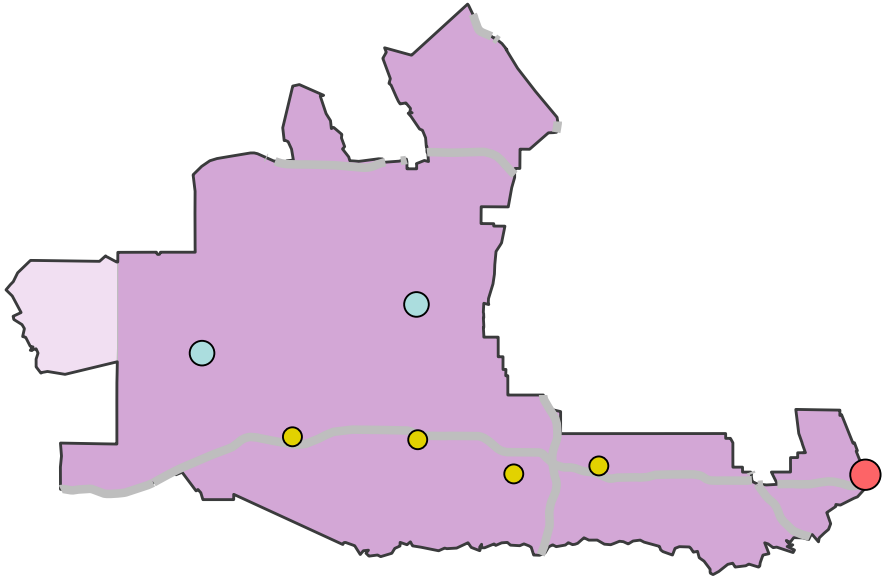
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 30

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

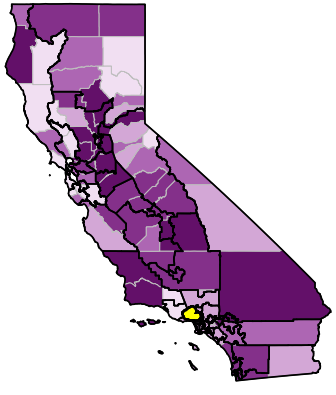
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 30

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 30

The map for Congressional District 30 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 30 (4 Primary, 2 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253643

CALIFORNIA

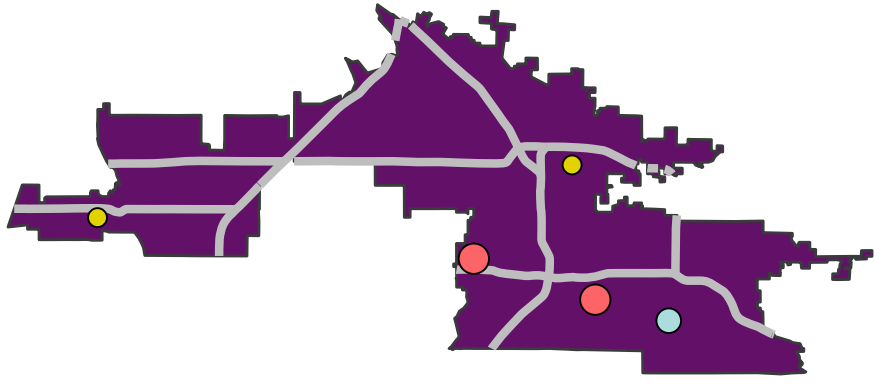
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 31

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

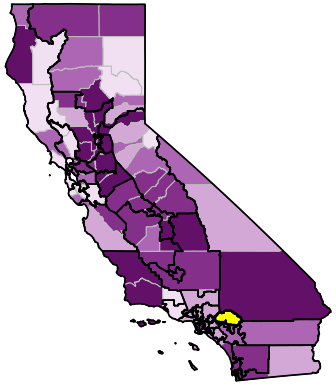
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 31

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 31

The map for Congressional District 31 in California shows that stroke death rates (ages 35+, 2021 − 2023) for San Bernardino County, the single county represented in the district, is 88 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 31 (2 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253644

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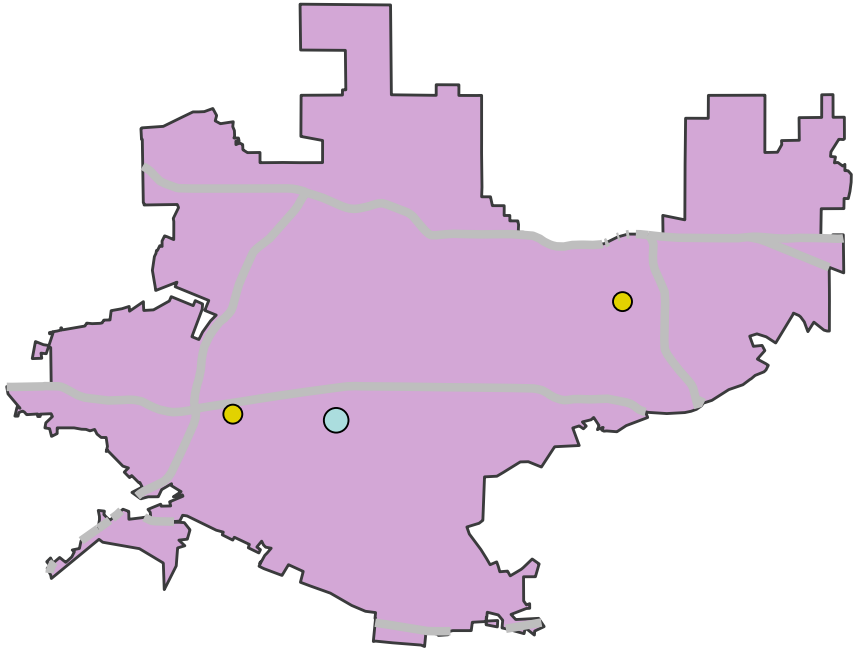
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 32



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162
- County*
- Highway

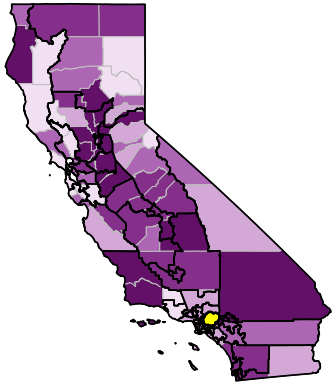
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 32

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 32

The map for Congressional District 32 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 32 (2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253645

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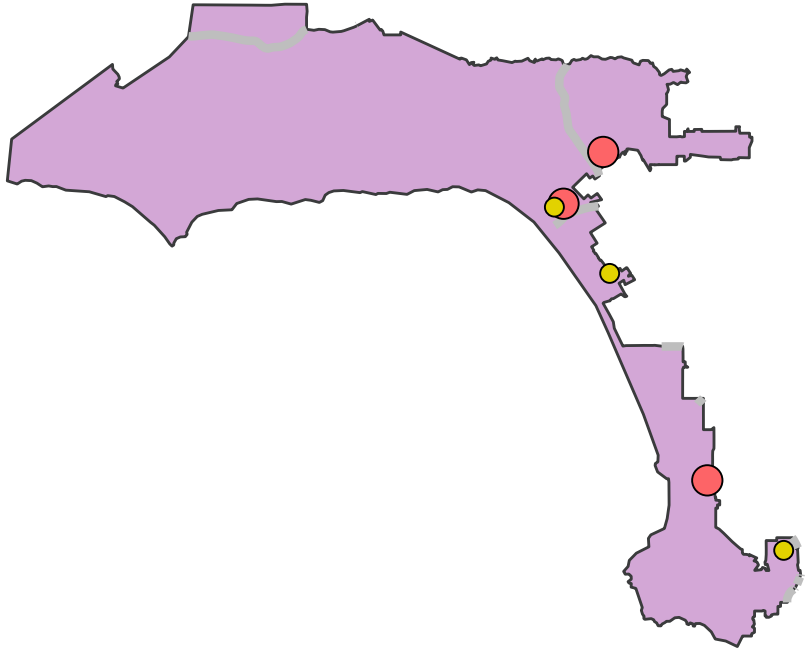
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 33



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

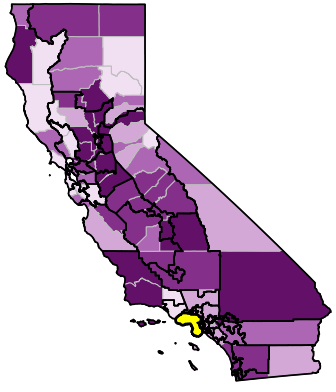
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 33

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 33

The map for Congressional District 33 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 33 (3 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253646

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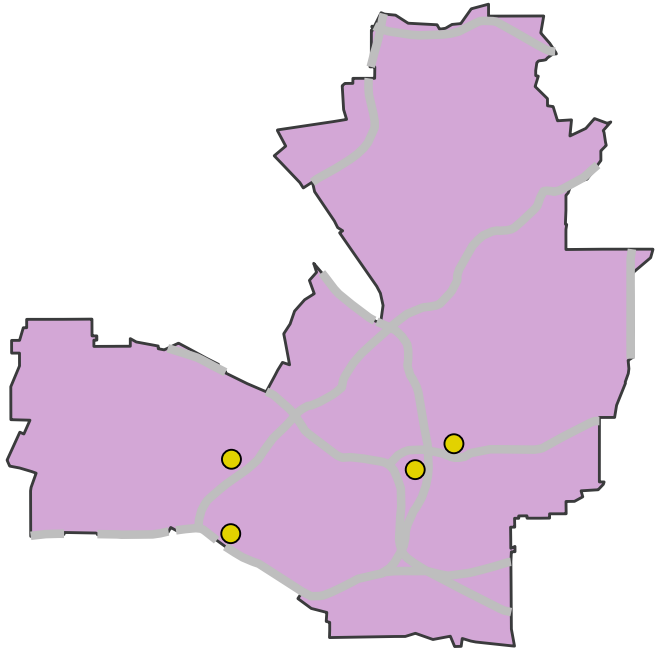
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 34

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

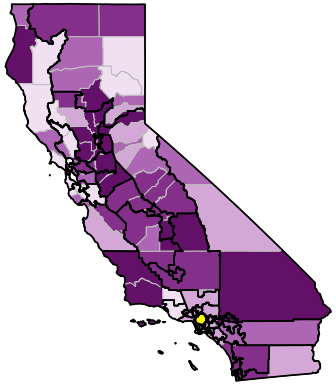
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 34

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 34

The map for Congressional District 34 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 34 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253647

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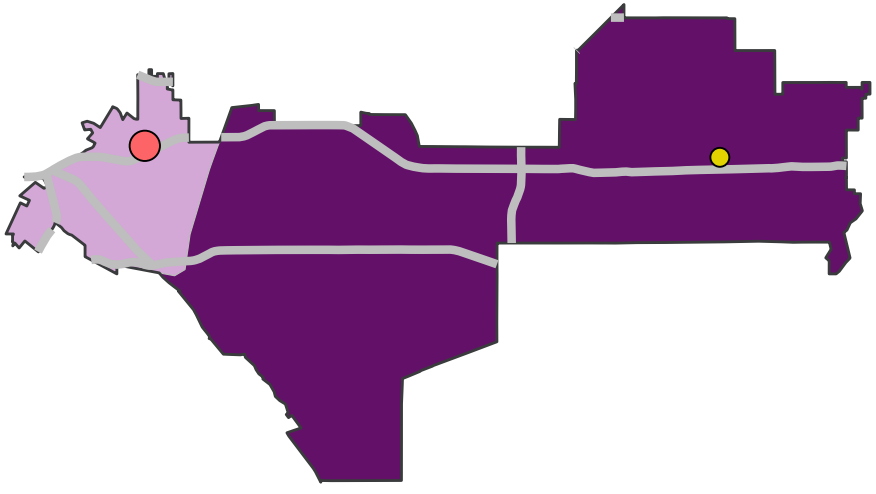
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 35

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

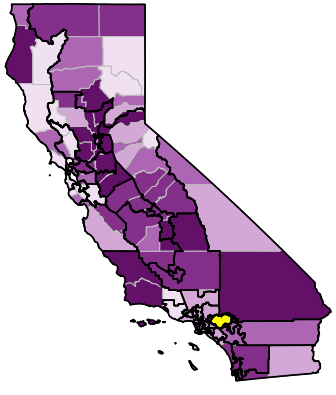
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 35

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 35

The map for Congressional District 35 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 88 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 35 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253648

CALIFORNIA

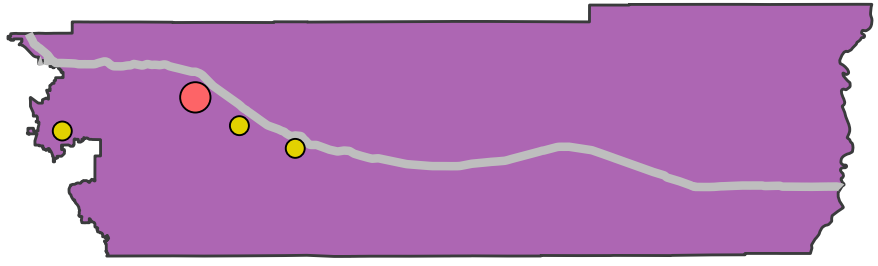
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 36



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

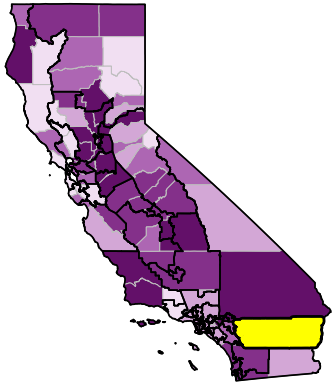
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 36

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 36

The map for Congressional District 36 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Riverside County, the single county represented in the district, is 80 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 36 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253649

CALIFORNIA

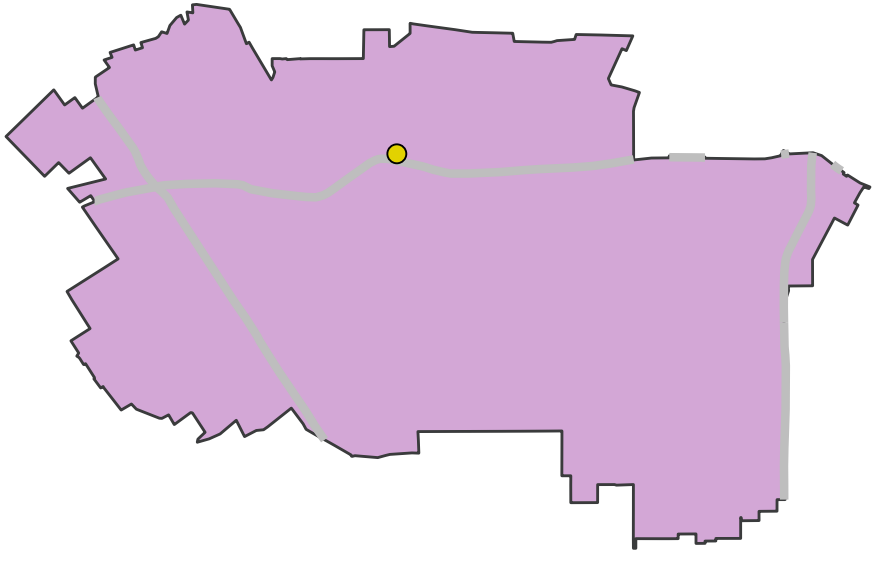
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 37

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

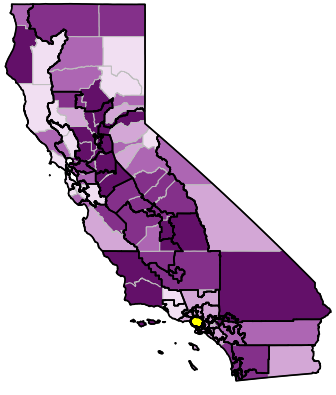
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 37

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 37

The map for Congressional District 37 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There is only 1 stroke center in District 37 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253650

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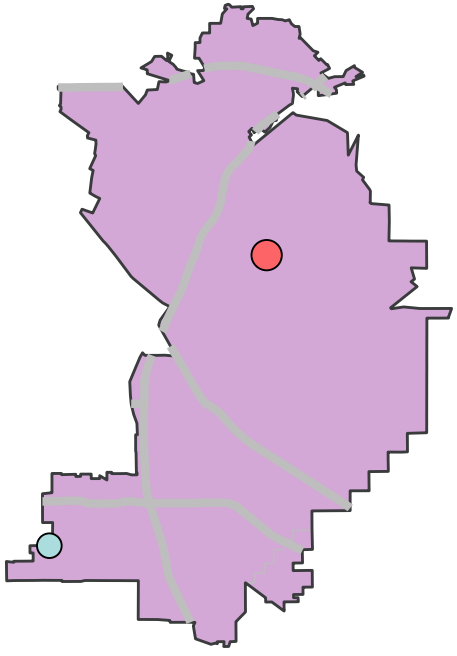
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 38

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

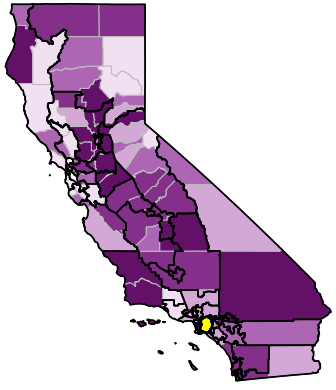
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 38

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 38

The map for Congressional District 38 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 71 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 38 (1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253651

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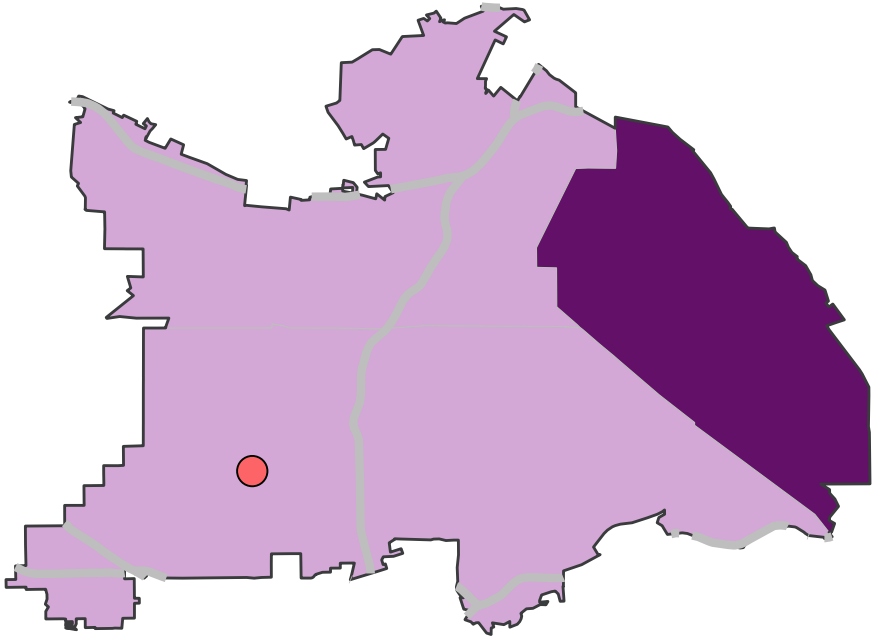
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 39



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

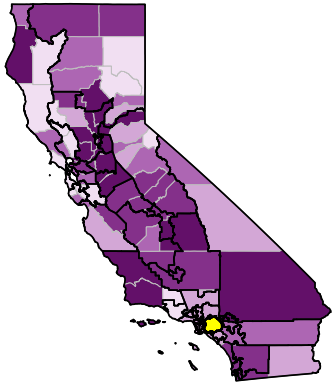
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 39

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 39

The map for Congressional District 39 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 88 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There is only 1 stroke center in District 39 (1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253652

CALIFORNIA

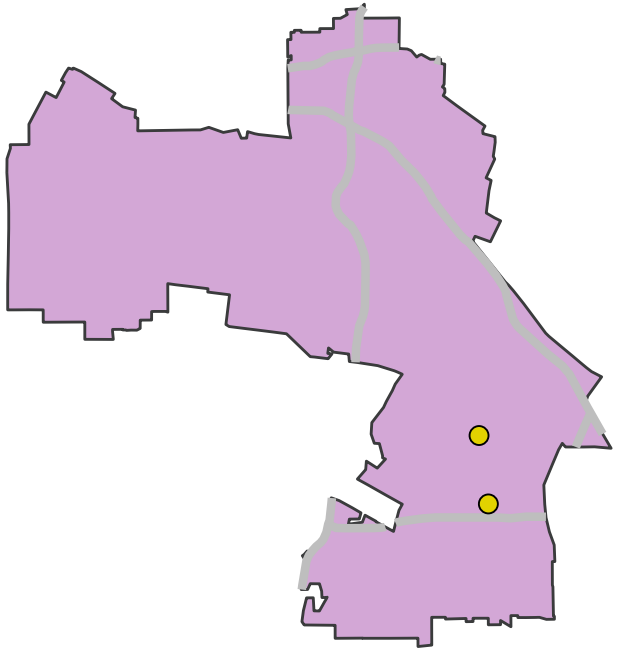
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 40

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

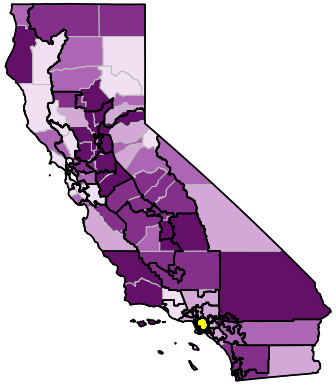
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 40

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 40

The map for Congressional District 40 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 40 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253653

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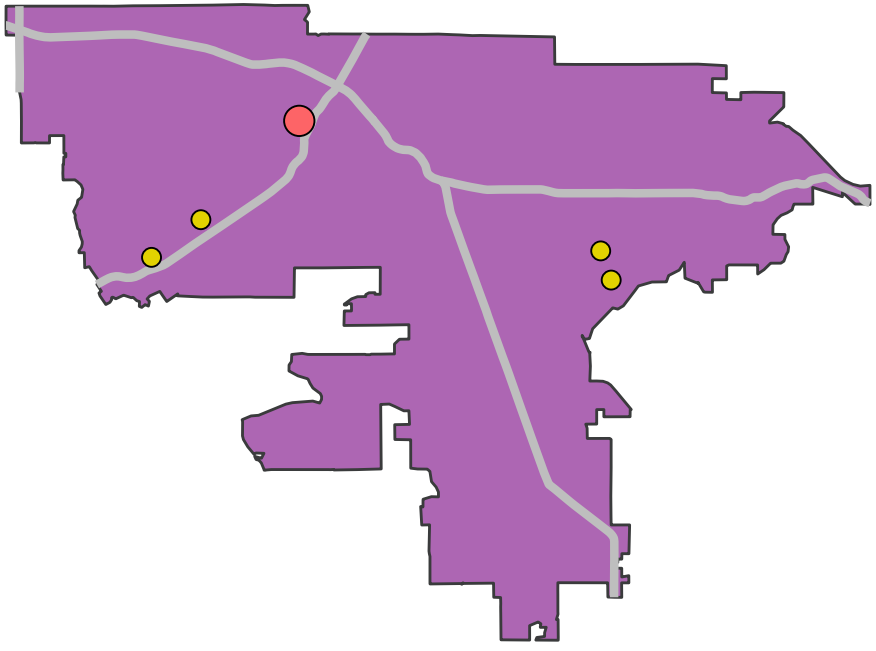
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 41

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

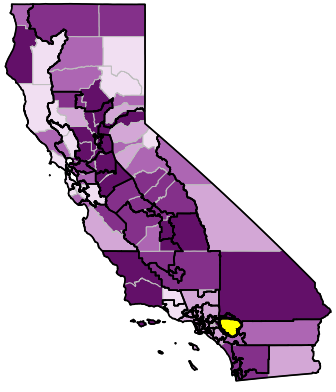
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 41

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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Stroke Death Rates

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Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 41

The map for Congressional District 41 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Riverside County, the single county represented in the district, is 80 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 41 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253654

CALIFORNIA

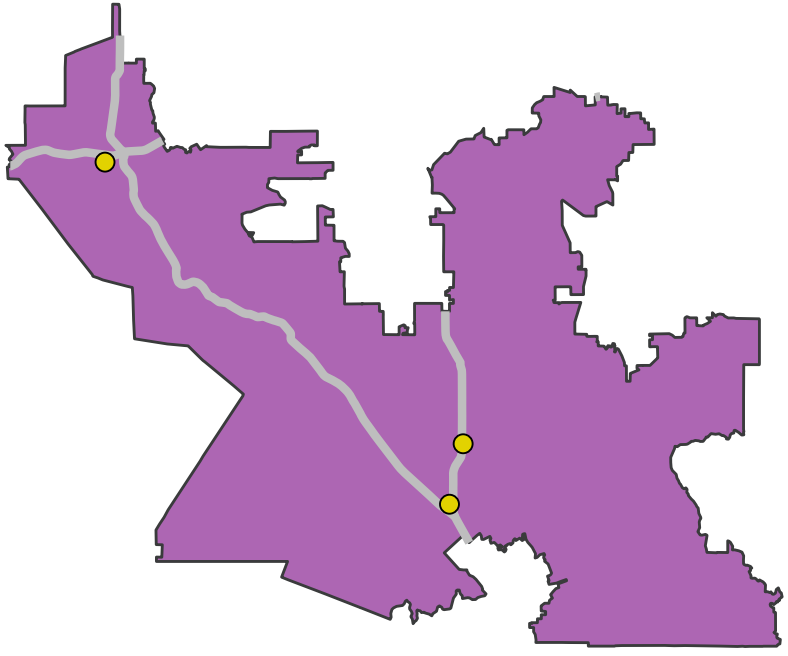
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 42

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

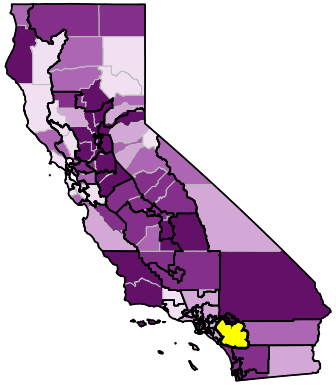
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 42

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 42

The map for Congressional District 42 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Riverside County, the single county represented in the district, is 80 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 42 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253655

CALIFORNIA

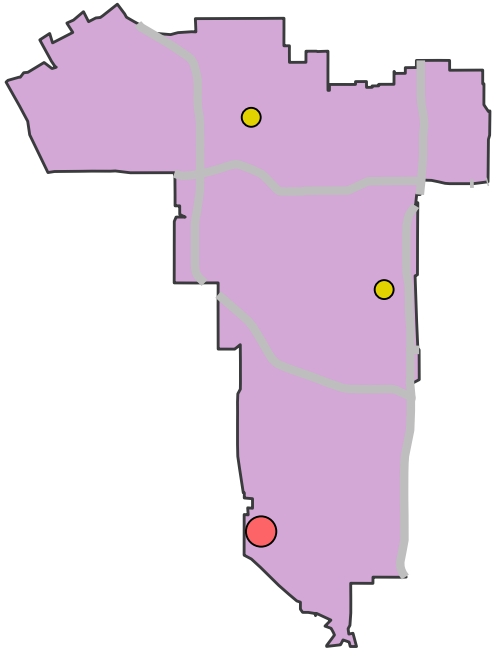
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 43

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

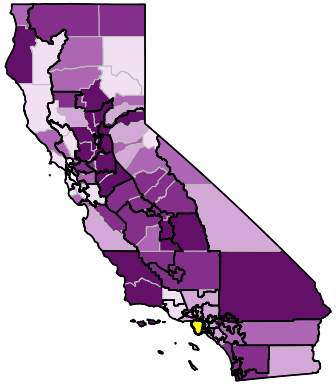
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 43

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 43

The map for Congressional District 43 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 43 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253656

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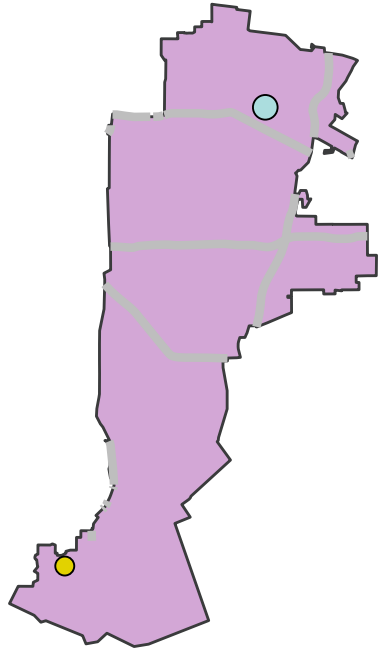
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 44

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

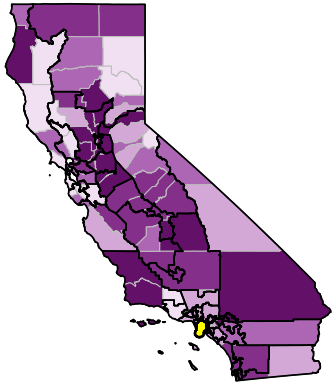
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 44

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 44

The map for Congressional District 44 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Los Angeles County, the single county represented in the district, is 68 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 44 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253657

CALIFORNIA

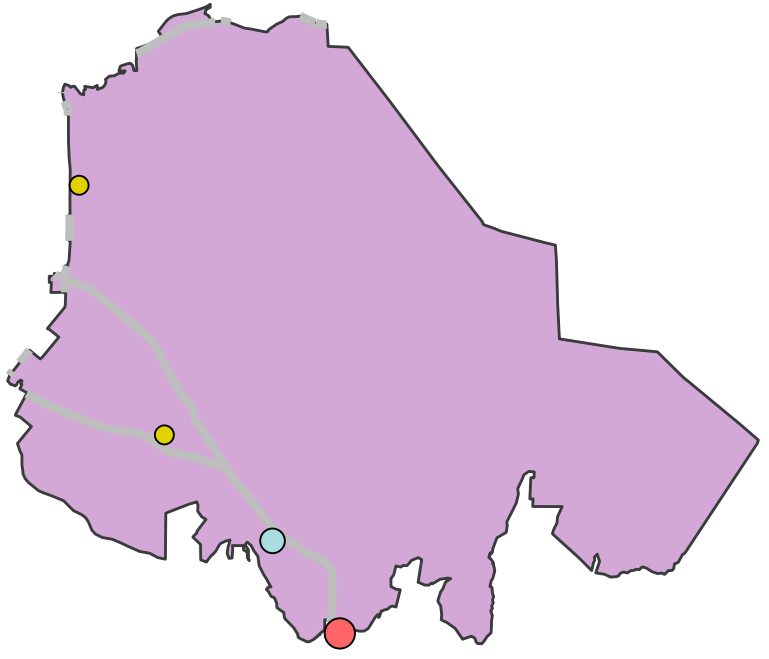
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 45

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

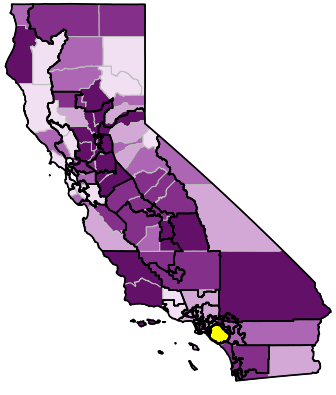
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 45

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 45

The map for Congressional District 45 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Orange County, the single county represented in the district, is 71 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 45 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253658

CALIFORNIA

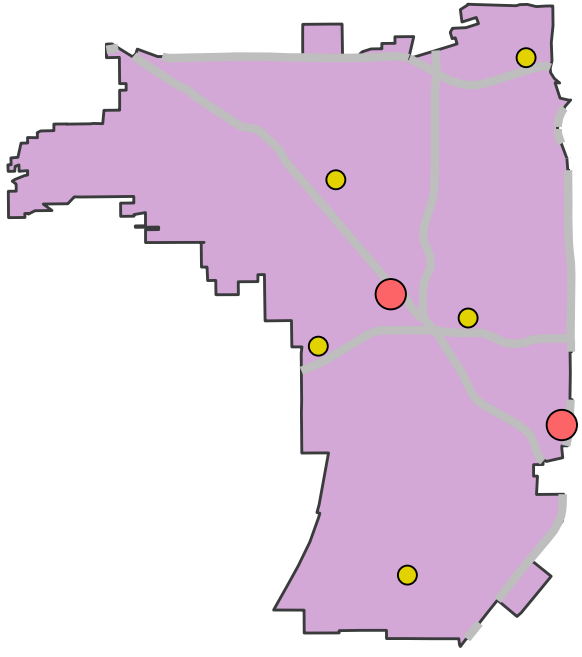
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 46

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

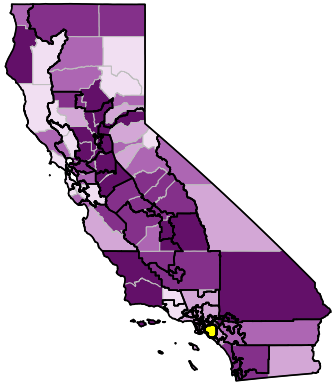
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 46

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 46

The map for Congressional District 46 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Orange County, the single county represented in the district, is 71 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 46 (5 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253659

CALIFORNIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 47

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

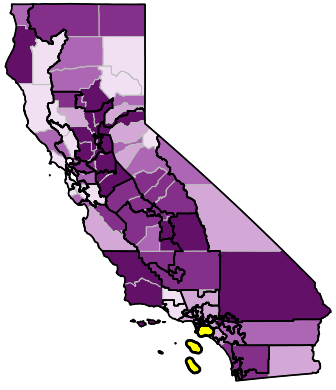
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

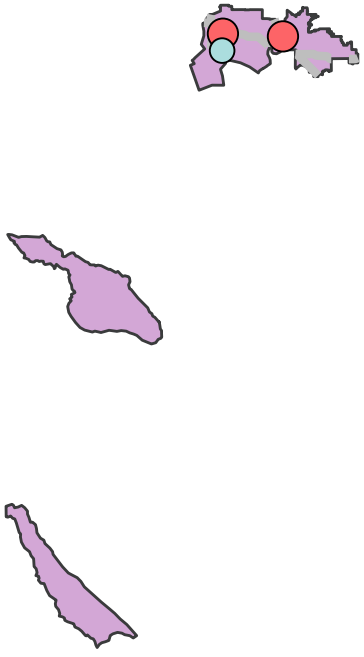
Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 47



*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 47

The map for Congressional District 47 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 71 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 47 (1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253660

CALIFORNIA

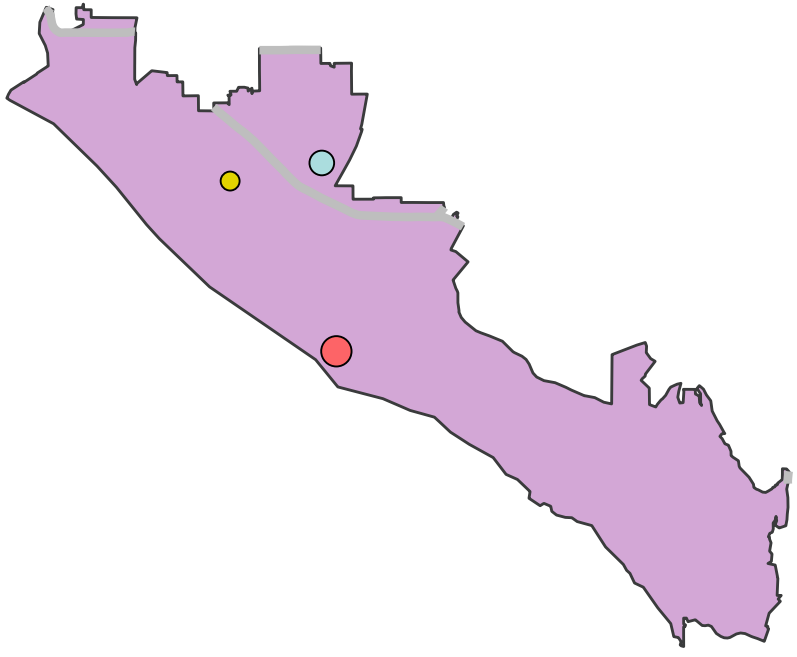
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 48

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

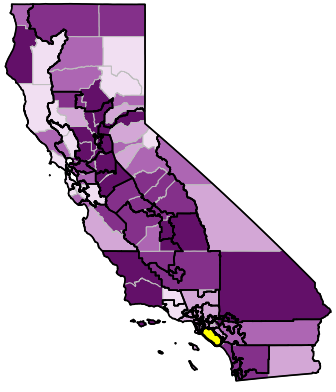
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 48

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 48

The map for Congressional District 48 in California shows that stroke death rates (ages 35+, 2021 − 2023) for Orange County, the single county represented in the district, is 71 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 48 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253661

CALIFORNIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 49

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

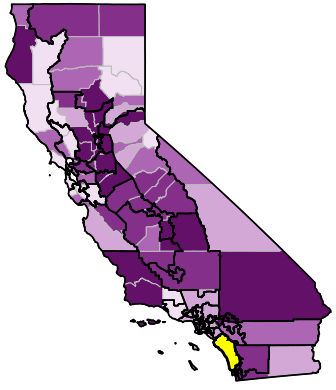
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 49

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 49

The map for Congressional District 49 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 84 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 49 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253662

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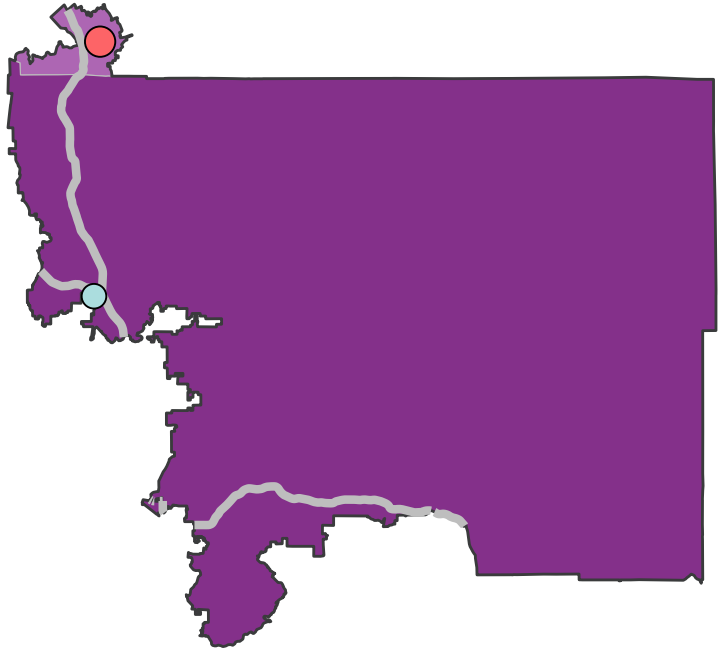
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 50



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

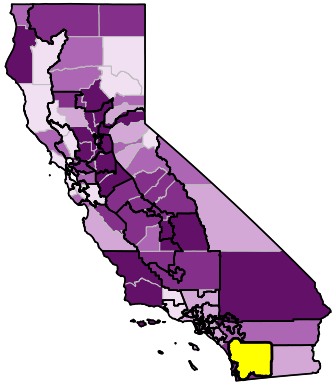
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 50

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 50

The map for Congressional District 50 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 84 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 50 (1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253663

CALIFORNIA

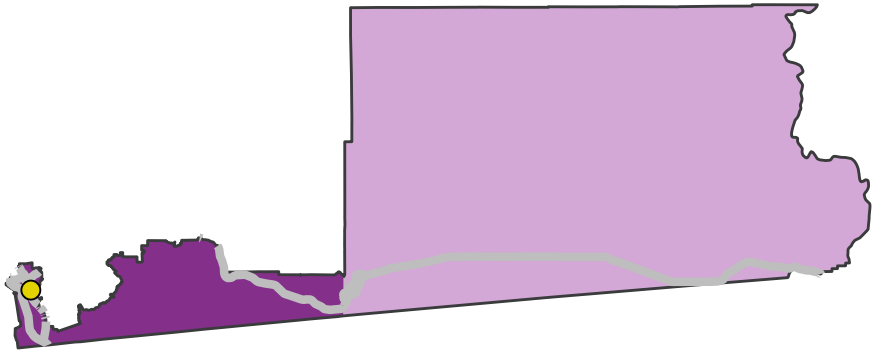
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 51

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

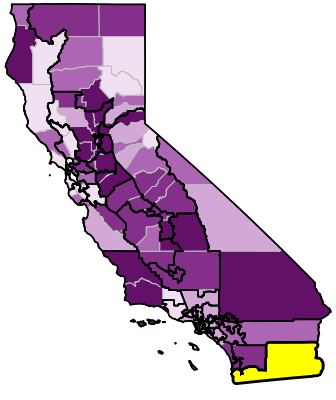
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 51

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 51

The map for Congressional District 51 in California shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 84 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There is only 1 stroke center in District 51 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253664

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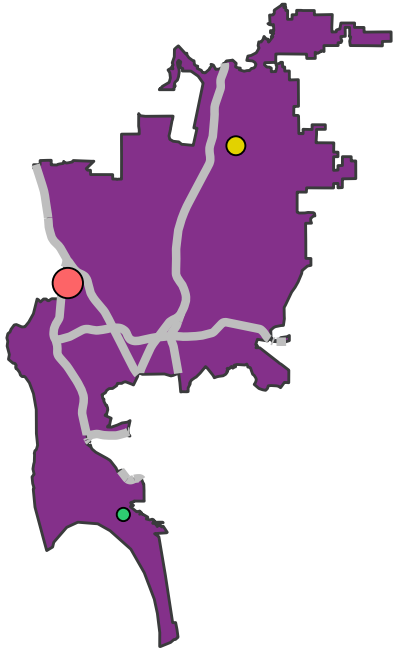
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 52

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 50 − 68
- 68 − 76
- 76 − 83
- 83 − 87
- 87 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

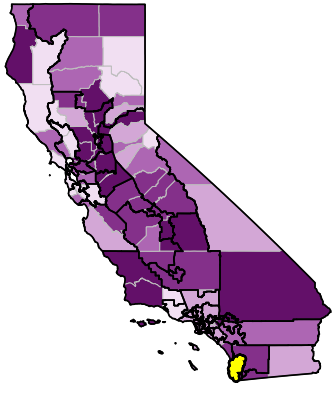
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | California

82 per 100,000 persons



Congressional District 52

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CALIFORNIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: California Congressional District 52

The map for Congressional District 52 in California shows that stroke death rates (ages 35+, 2021 − 2023) for San Diego County, the single county represented in the district, is 84 per 100,000. For California and the United States, stroke death rates are 82 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 52 (1 Acute, 1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253665

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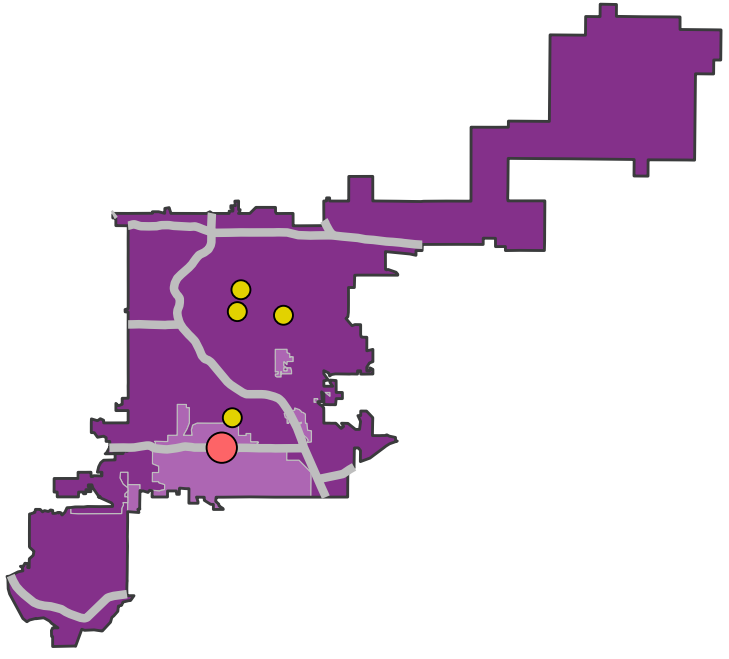
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

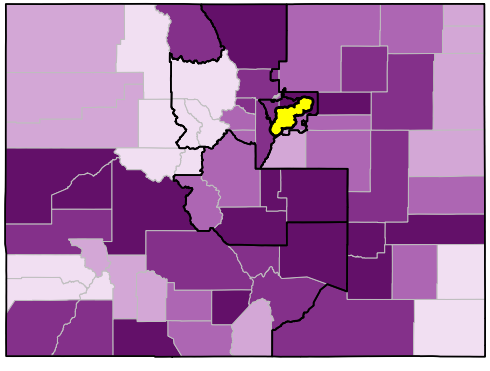
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 1

The map for Congressional District 1 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 67 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253666

COLORADO

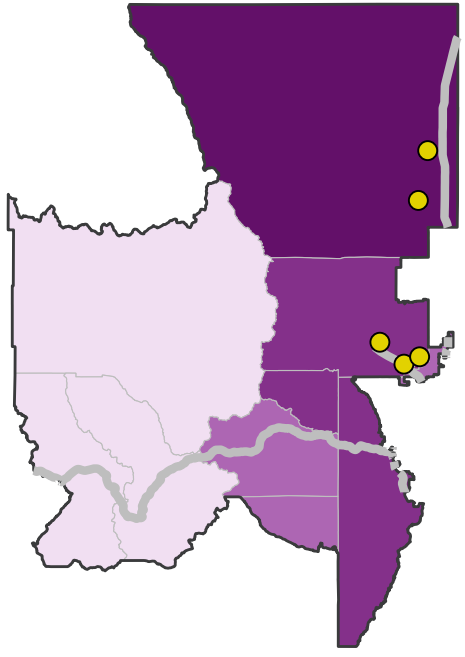
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

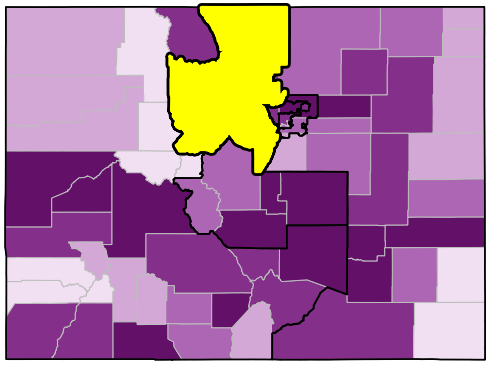
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 2

The map for Congressional District 2 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 33 − 74 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253667

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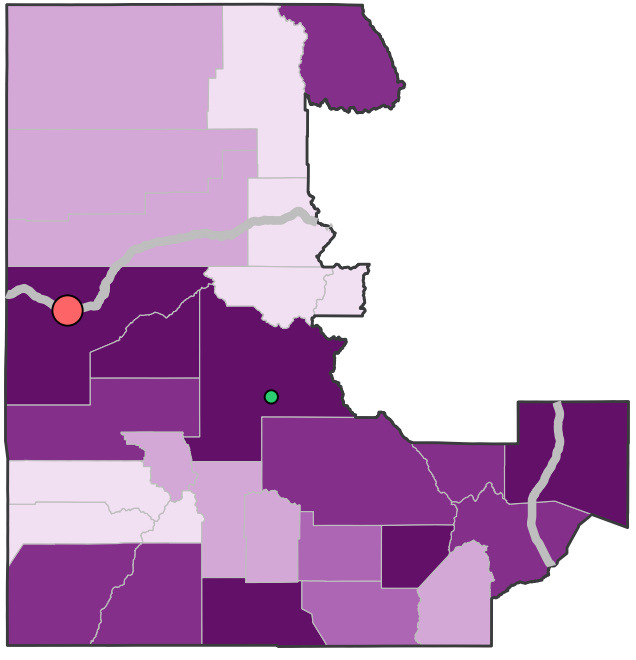
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

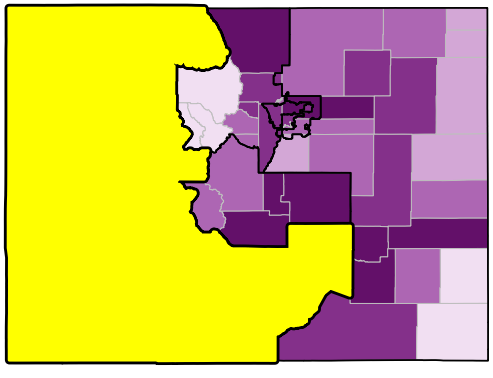
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 3

The map for Congressional District 3 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 25 − 97 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 3 (1 Acute, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253668

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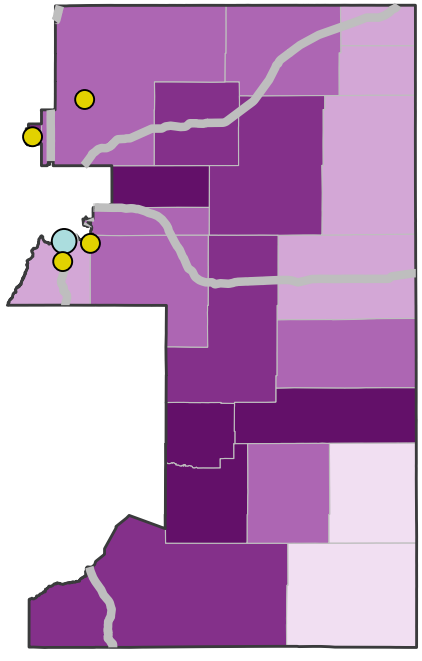
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

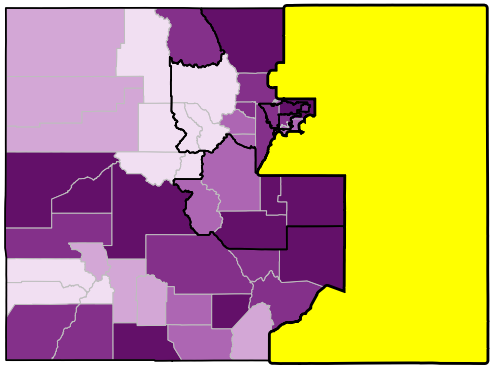
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 4

The map for Congressional District 4 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 45 − 84 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253669

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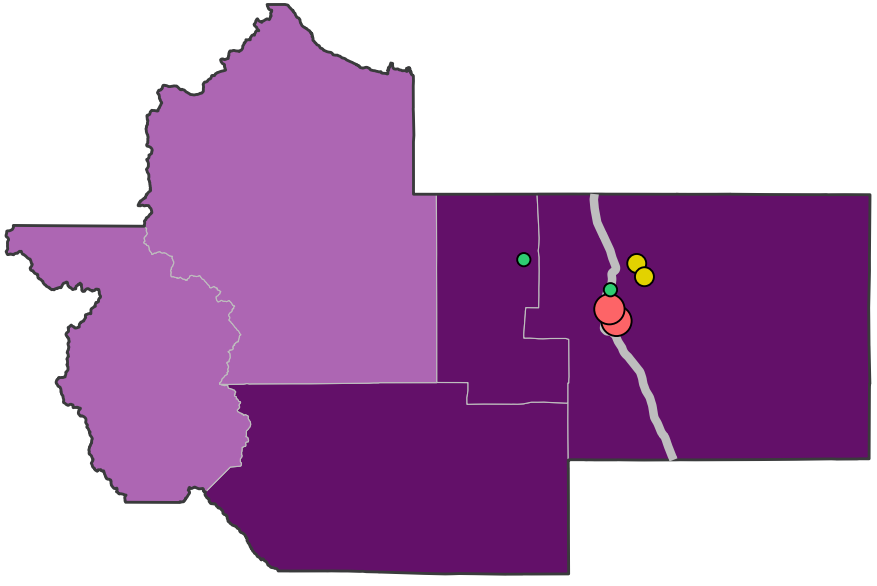
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

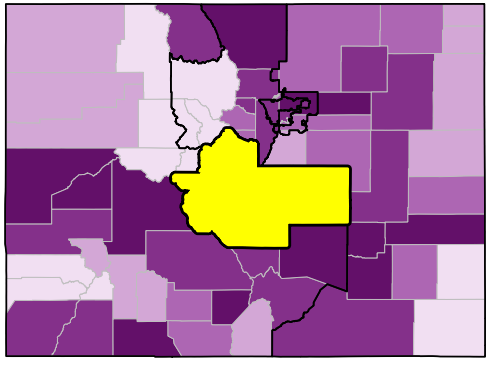
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 5

The map for Congressional District 5 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 61 − 81 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 5 (2 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253670

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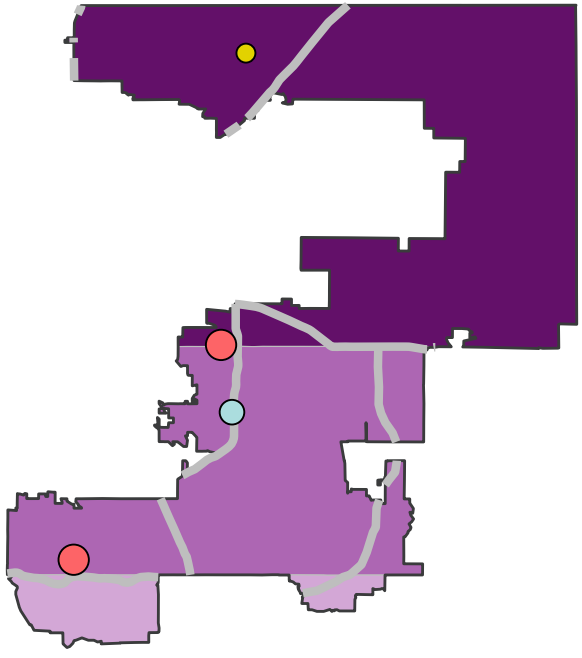
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

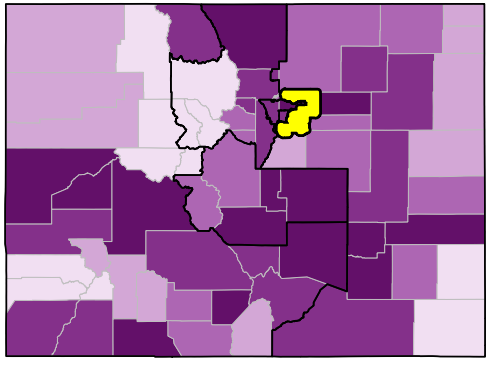
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 6

The map for Congressional District 6 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 71 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 6 (1 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253671

COLORADO

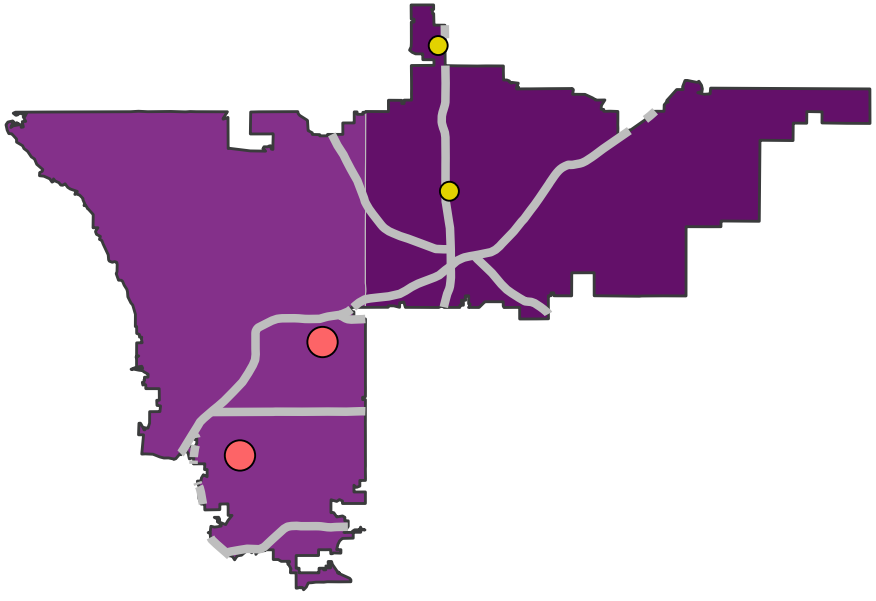
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

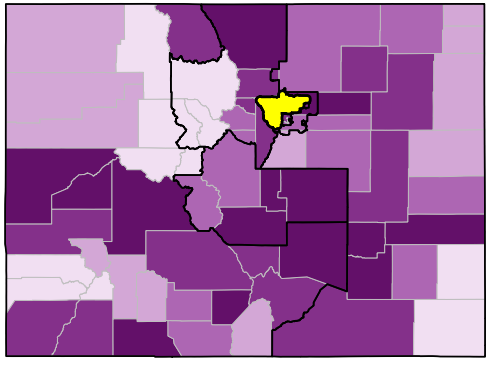
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 7

The map for Congressional District 7 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 71 per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 7 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253672

COLORADO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 25 − 55
- 55 − 61
- 61 − 66
- 66 − 71
- 71 − 97
- County*

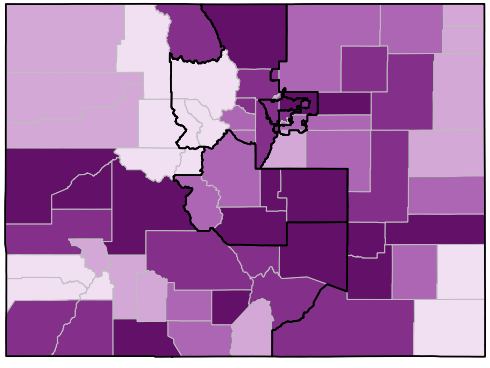
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Colorado

63 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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COLORADO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Colorado Congressional District 8

The map for Congressional District 8 in Colorado shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Colorado and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 8 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253673

CONNECTICUT

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2020−2022

- 49 − 55
- 55 − 56
- 56 − 57
- 57 − 58
- 58 − 64

County*
Highway

Stroke Centers

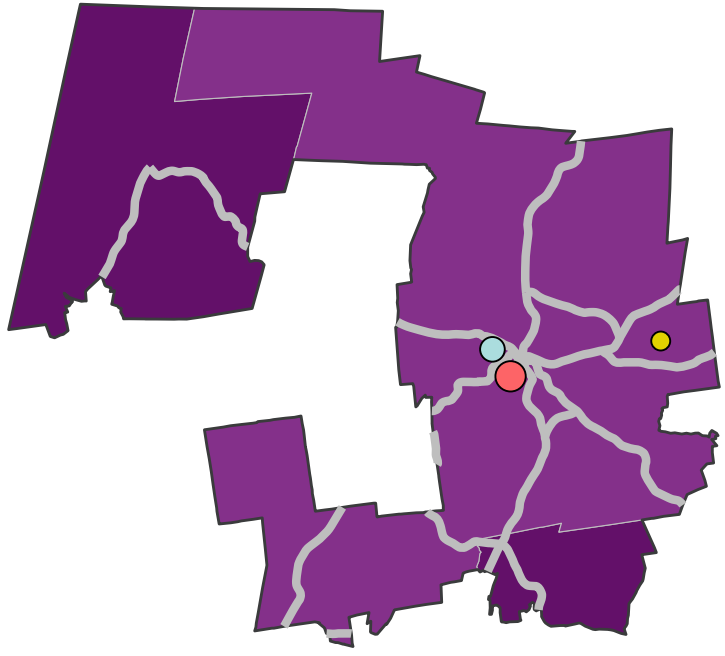
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

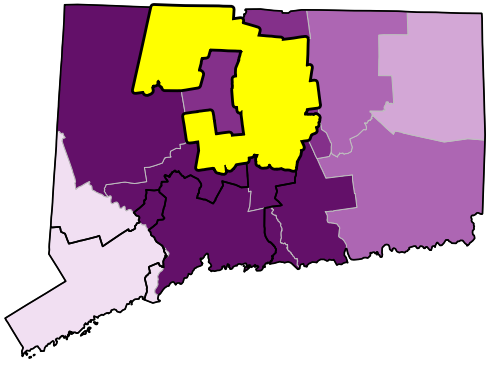
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Connecticut

57 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2020−2022) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Connecticut Congressional District 1

The map for Congressional District 1 in Connecticut shows that stroke death rates (ages 35+, 2020−2022) for counties (or partial counties) in the district range from 57 − 59 per 100,000. For Connecticut and the United States, stroke death rates are 57 and 79 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253674

CONNECTICUT

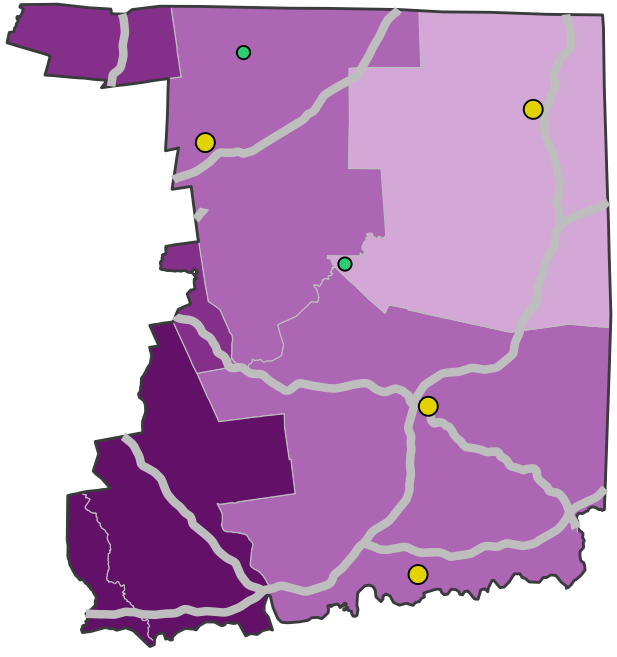
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2020−2022

- 49 − 55
- 55 − 56
- 56 − 57
- 57 − 58
- 58 − 64

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

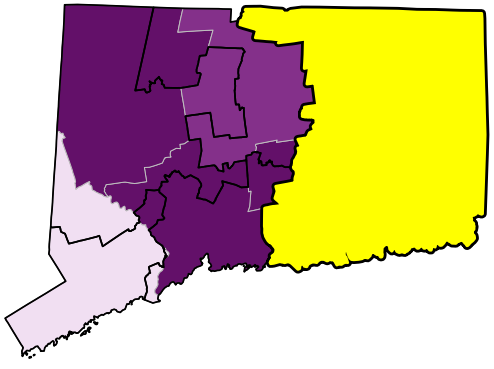
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Connecticut

57 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2020−2022) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Connecticut Congressional District 2

The map for Congressional District 2 in Connecticut shows that stroke death rates (ages 35+, 2020−2022) for counties (or partial counties) in the district range from 55 − 64 per 100,000. For Connecticut and the United States, stroke death rates are 57 and 79 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (2 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253675

CONNECTICUT

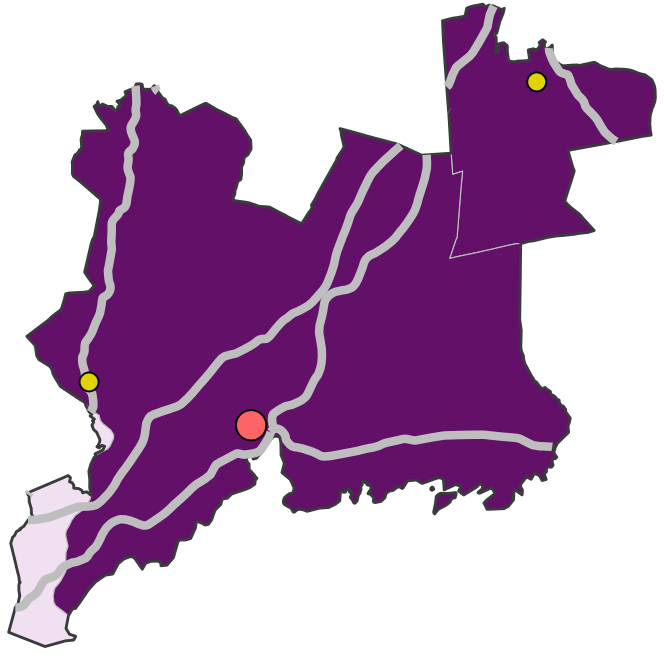
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2020−2022

- 49 − 55
- 55 − 56
- 56 − 57
- 57 − 58
- 58 − 64

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

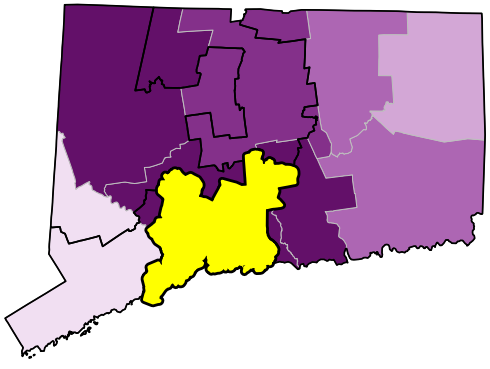
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Connecticut

57 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2020−2022) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Connecticut Congressional District 3

The map for Congressional District 3 in Connecticut shows that stroke death rates (ages 35+, 2020−2022) for counties (or partial counties) in the district range from 49 − 64 per 100,000. For Connecticut and the United States, stroke death rates are 57 and 79 per 100,000, respectively.

There are a total of 3 stroke centers in District 3 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253676

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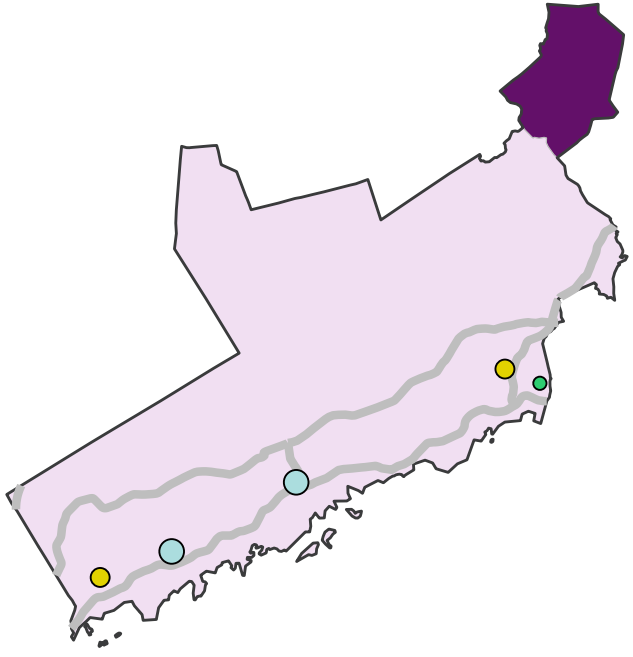
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2020−2022

- 49 − 55
- 55 − 56
- 56 − 57
- 57 − 58
- 58 − 64

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

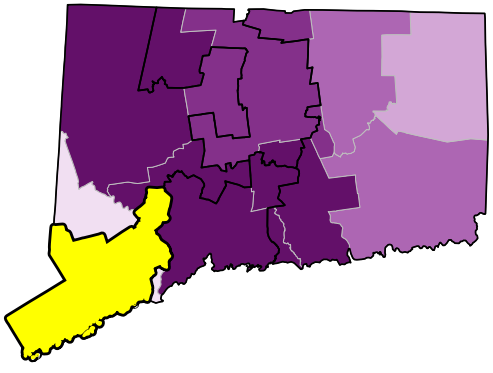
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Connecticut

57 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2020−2022) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Connecticut Congressional District 4

The map for Congressional District 4 in Connecticut shows that stroke death rates (ages 35+, 2020−2022) for counties (or partial counties) in the district range from 49 − 64 per 100,000. For Connecticut and the United States, stroke death rates are 57 and 79 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (1 Acute, 2 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253677

CONNECTICUT

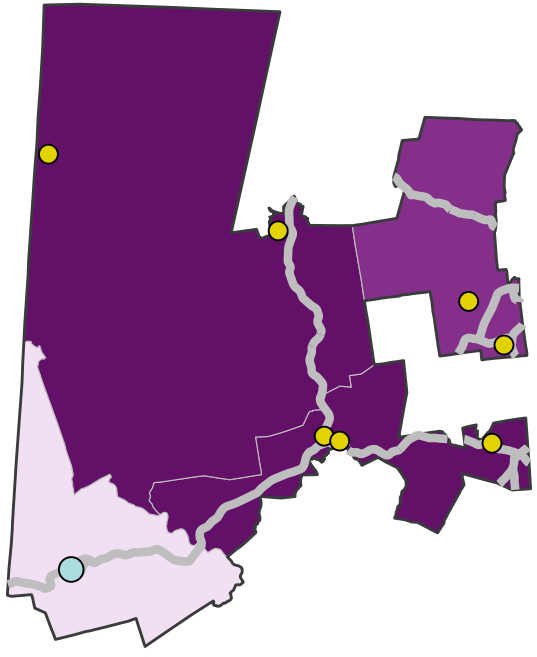
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2020−2022

- 49 − 55
- 55 − 56
- 56 − 57
- 57 − 58
- 58 − 64

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

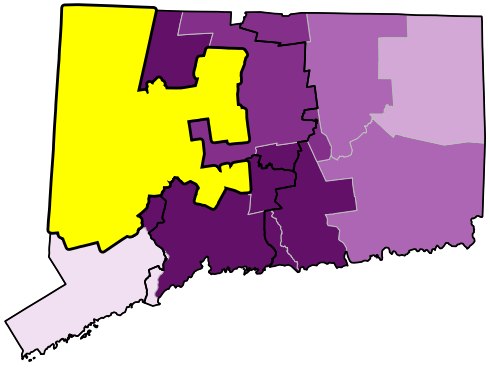
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Connecticut

57 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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CONNECTICUT

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2020−2022) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Connecticut Congressional District 5

The map for Congressional District 5 in Connecticut shows that stroke death rates (ages 35+, 2020−2022) for counties (or partial counties) in the district range from 49 − 64 per 100,000. For Connecticut and the United States, stroke death rates are 57 and 79 per 100,000, respectively.

There are a total of 8 stroke centers in District 5 (7 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253678

DELAWARE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

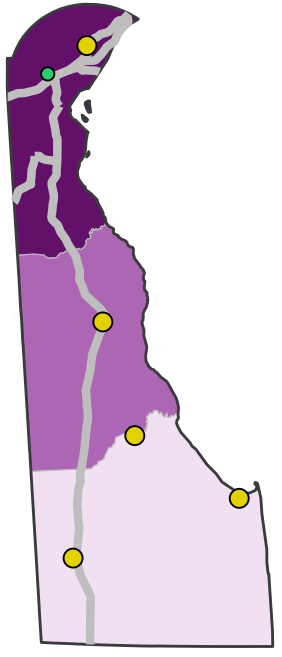
- 93
- 112
- 131

- County*
- Highway

Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Delaware

112 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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DELAWARE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Delaware Congressional District 1

The map for Congressional District 1 in Delaware shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 93 − 131 per 100,000. For Delaware and the United States, stroke death rates are 112 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253679

FLORIDA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

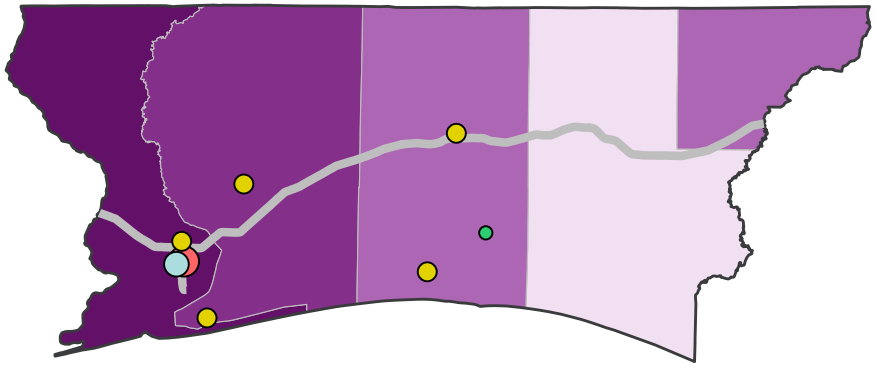
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

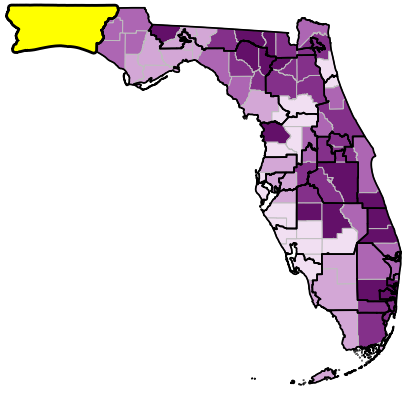
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 1

The map for Congressional District 1 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 112 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 1 (1 Acute, 5 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253680

FLORIDA

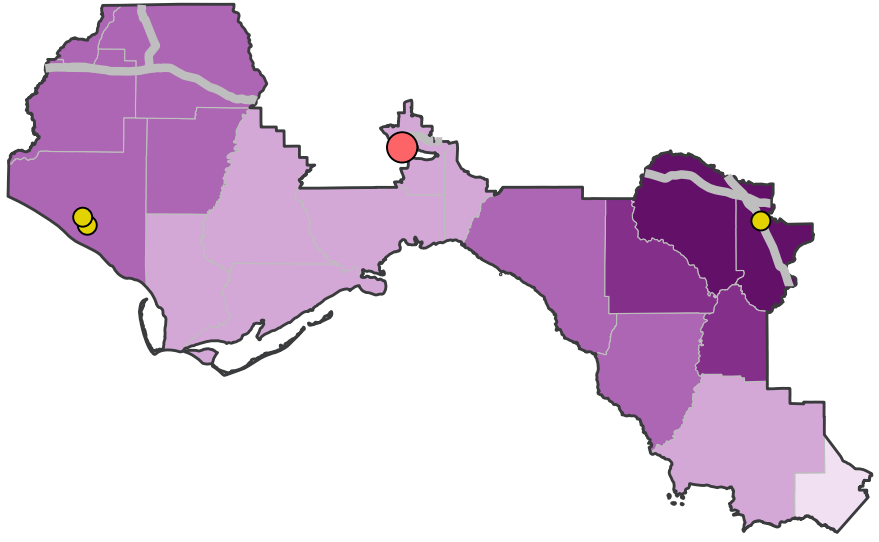
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

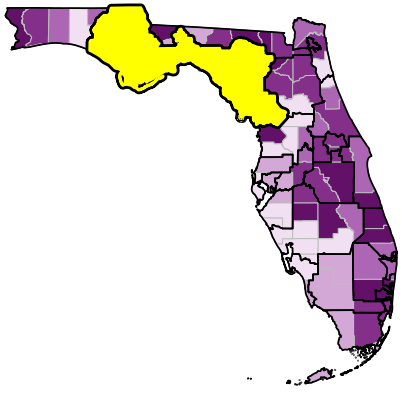
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 2

The map for Congressional District 2 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 118 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253681

FLORIDA

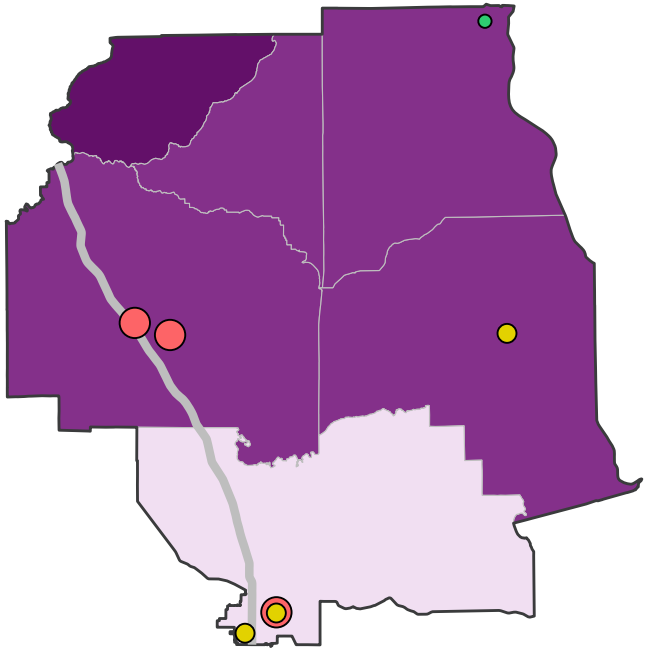
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

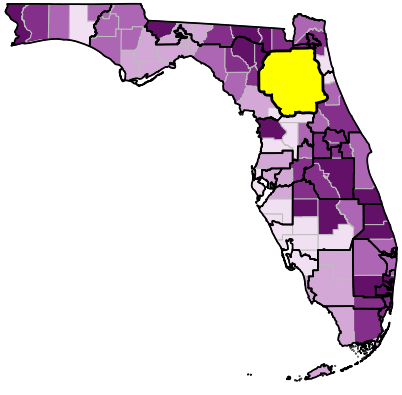
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 3

The map for Congressional District 3 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 116 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 3 (1 Acute, 3 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253682

FLORIDA

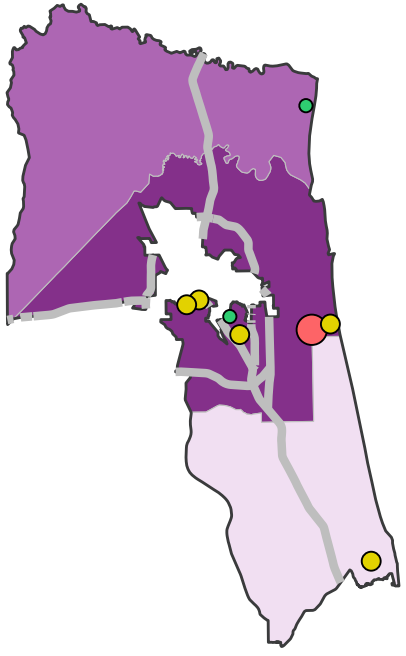
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

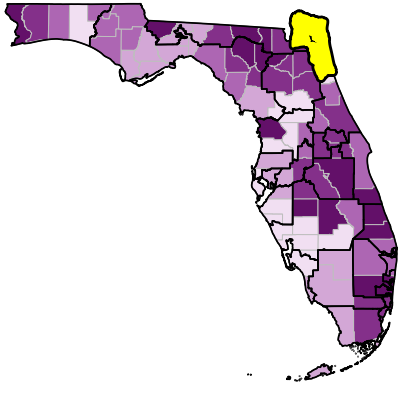
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 4

The map for Congressional District 4 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 106 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 4 (2 Acute, 5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253683

FLORIDA

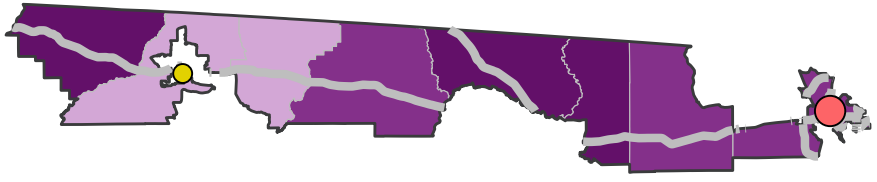
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

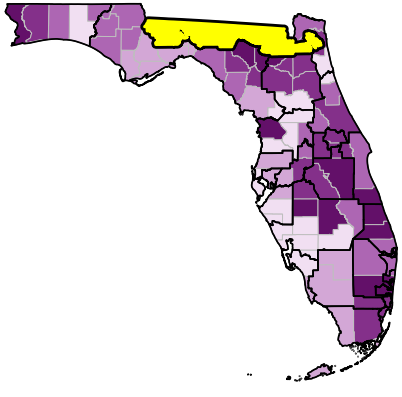
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 5

The map for Congressional District 5 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 118 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 5 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253684

FLORIDA

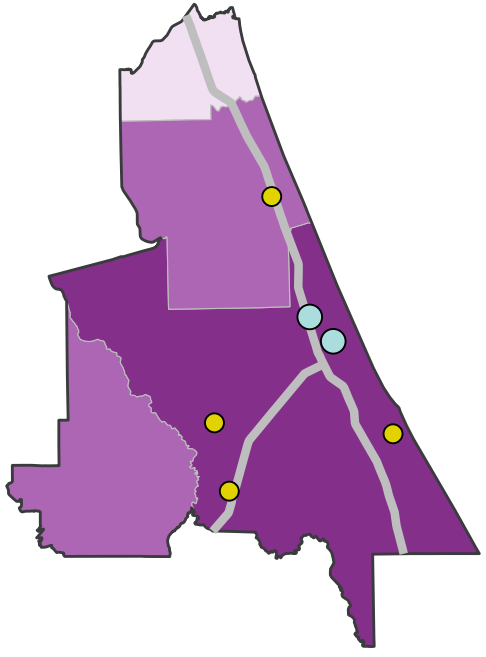
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

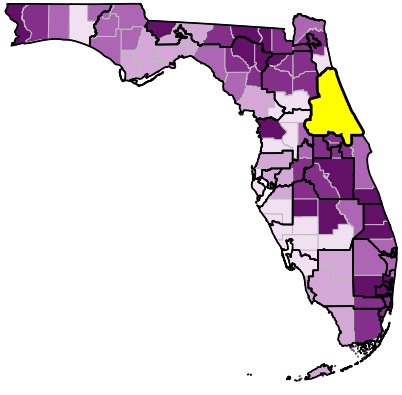
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 6

The map for Congressional District 6 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 109 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (4 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253685

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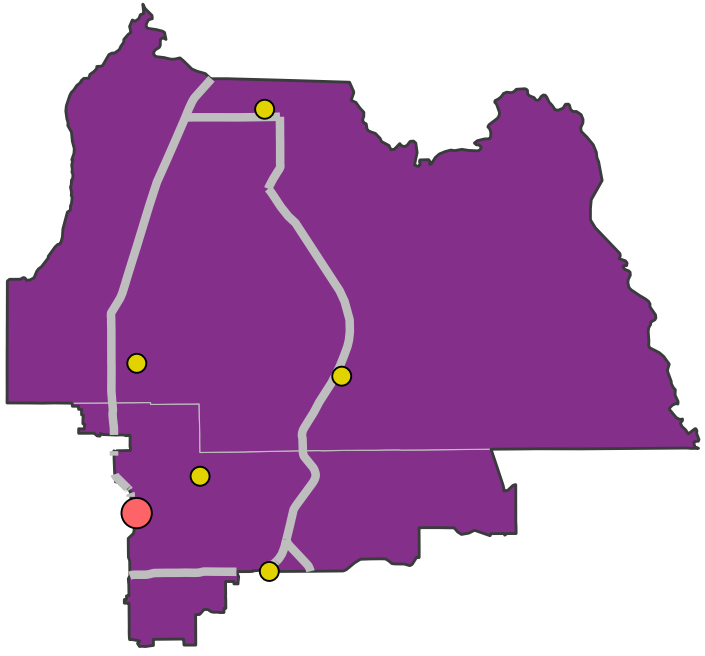
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

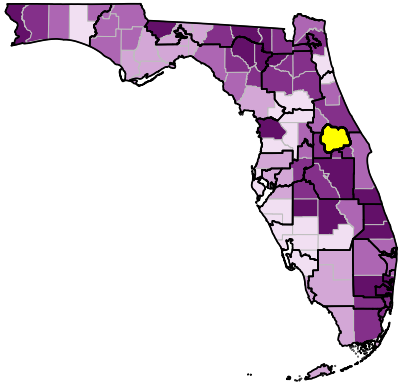
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 7

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 7

The map for Congressional District 7 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 102 − 111 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 7 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253686

FLORIDA

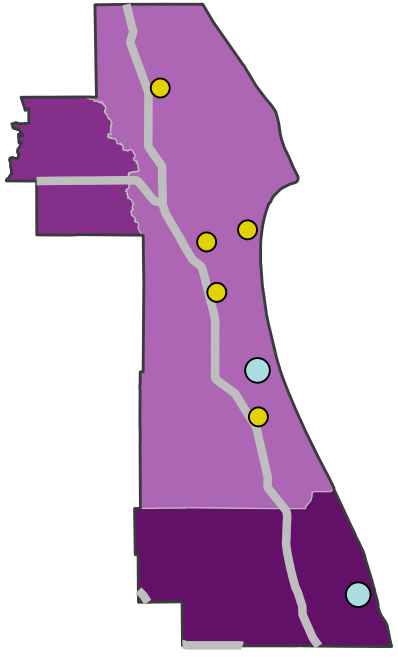
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

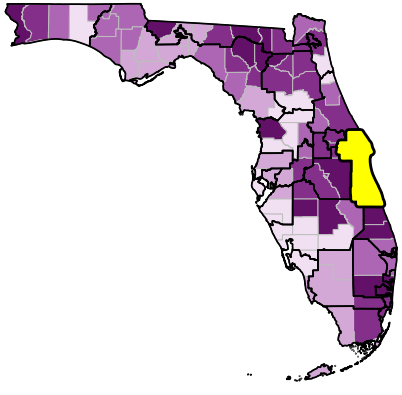
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 8

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 8

The map for Congressional District 8 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 96 − 134 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 8 (5 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253687

FLORIDA

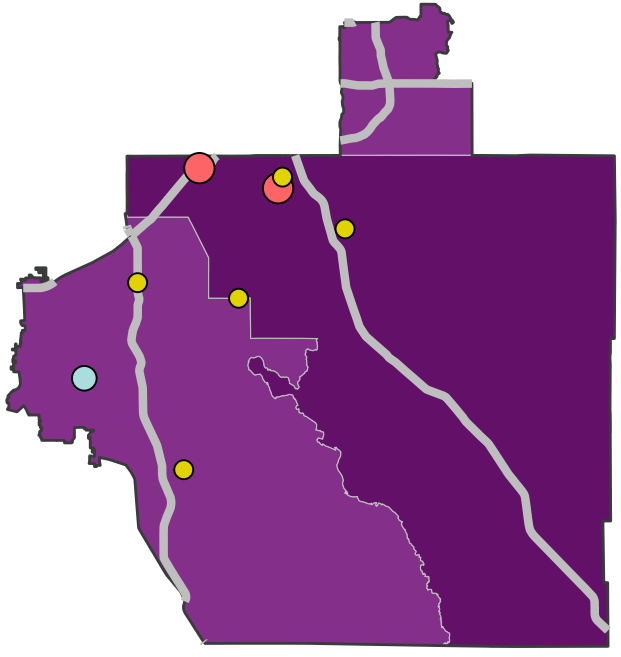
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

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This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 9



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

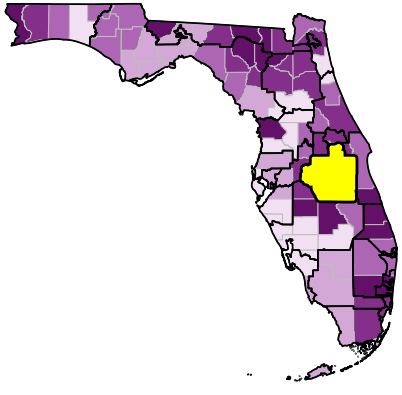
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ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 9

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 9

The map for Congressional District 9 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 102 − 116 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 9 (5 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253688

FLORIDA

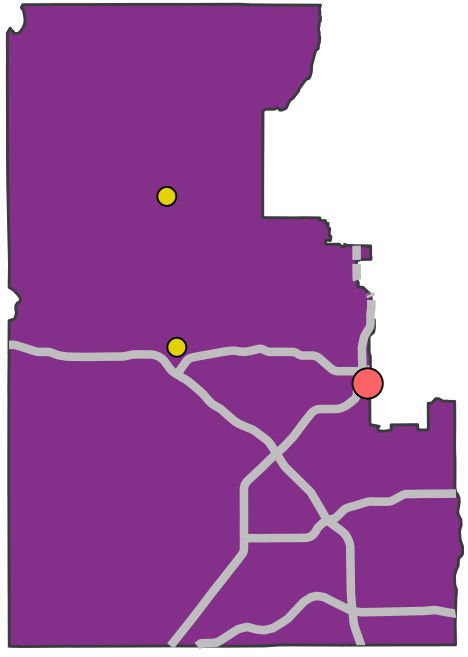
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 10



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

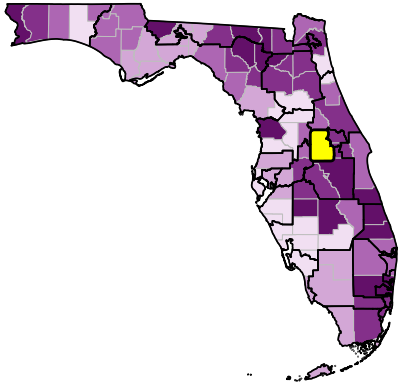
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 10

The map for Congressional District 10 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for Orange County, the single county represented in the district, is 102 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 10 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253689

FLORIDA

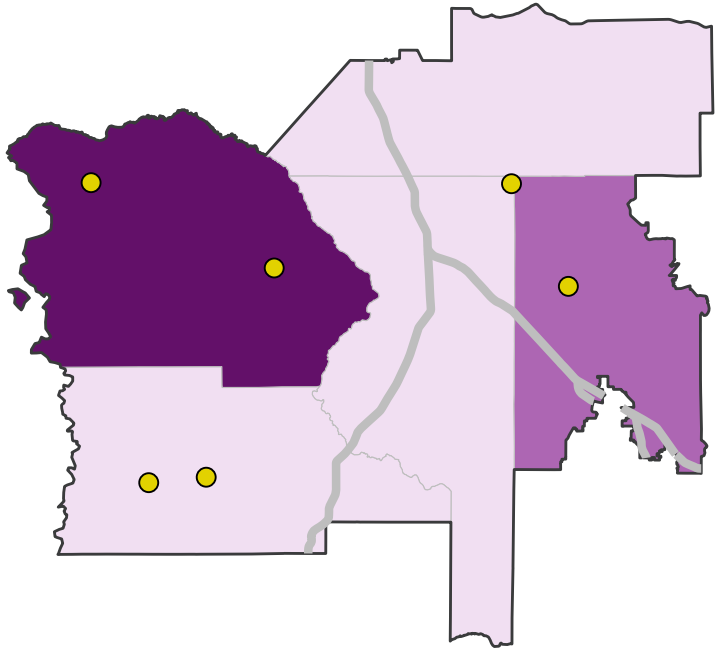
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

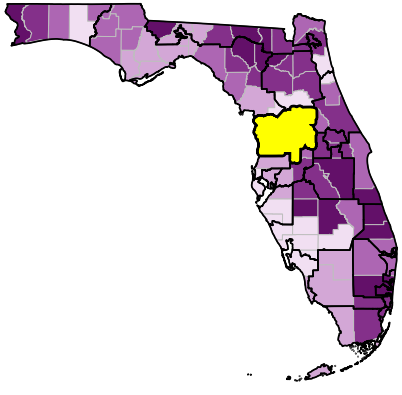
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 11

The map for Congressional District 11 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 130 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 11 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253690

FLORIDA

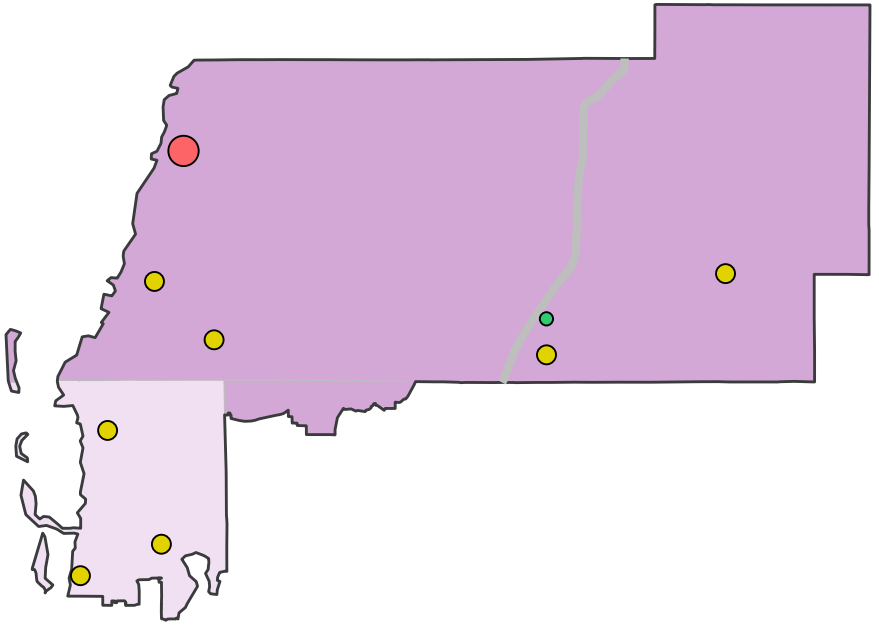
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 12



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

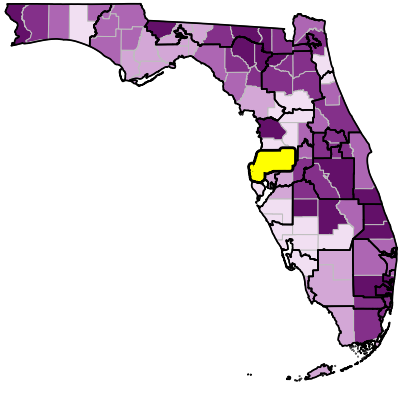
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 12

The map for Congressional District 12 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 78 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 12 (1 Acute, 7 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253691

FLORIDA

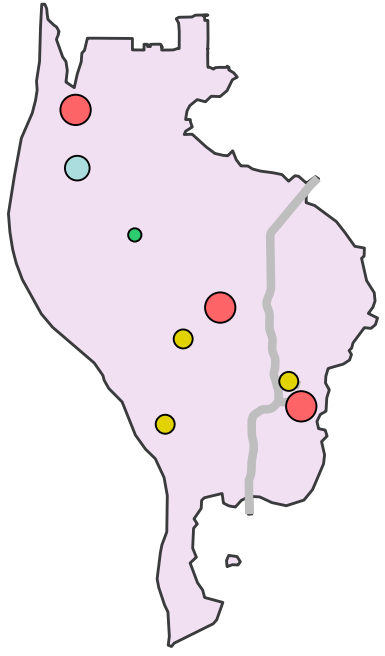
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

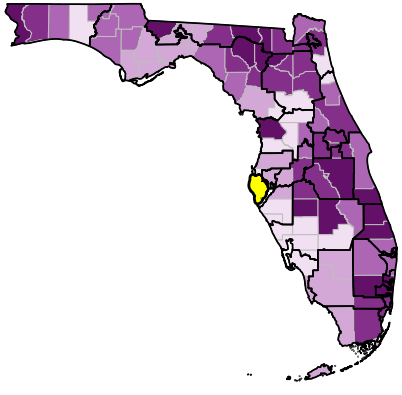
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 13

The map for Congressional District 13 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for Pinellas County, the single county represented in the district, is 65 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 13 (1 Acute, 3 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253692

FLORIDA

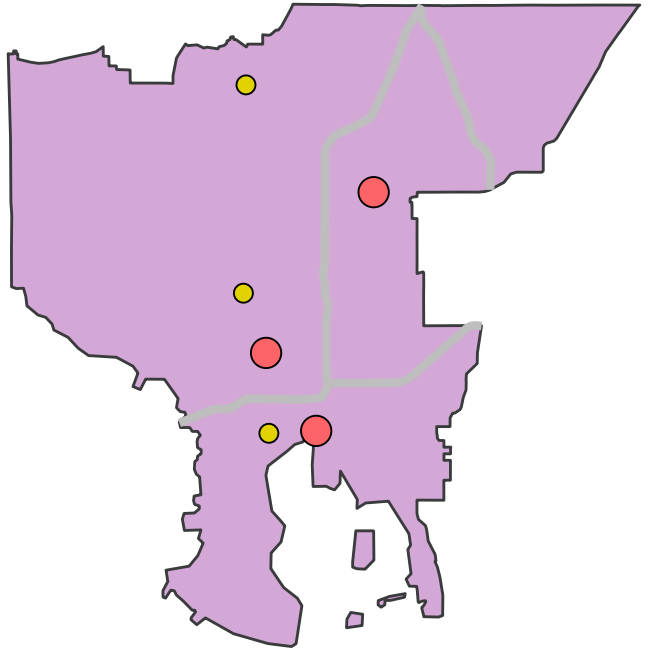
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

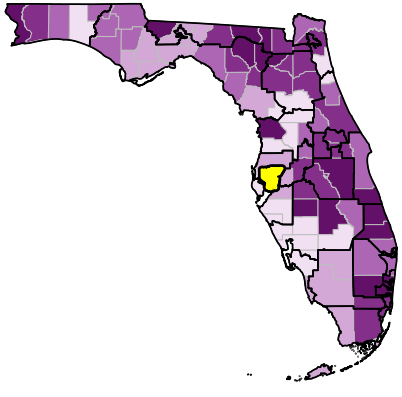
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 14

The map for Congressional District 14 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for Hillsborough County, the single county represented in the district, is 76 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 14 (3 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253693

FLORIDA

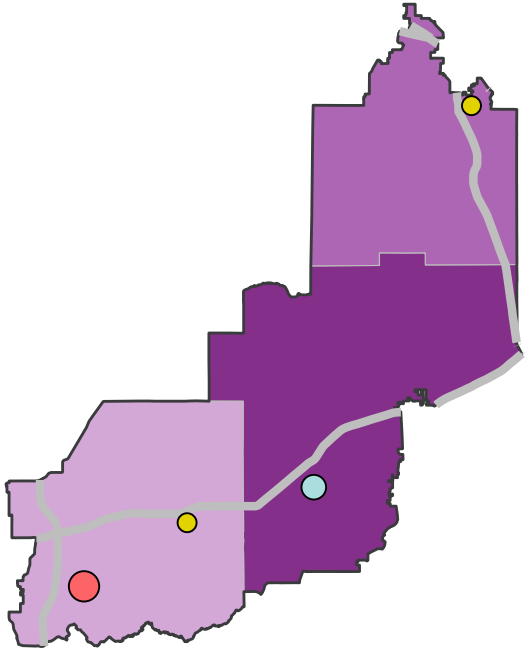
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 15



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

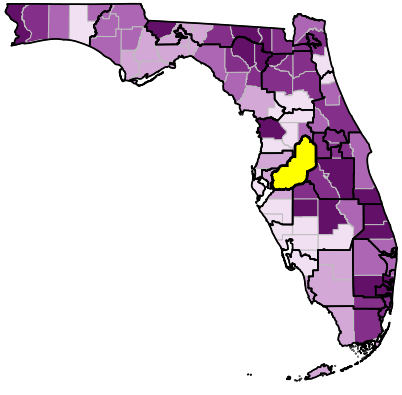
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 15

The map for Congressional District 15 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 103 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 15 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253694

FLORIDA

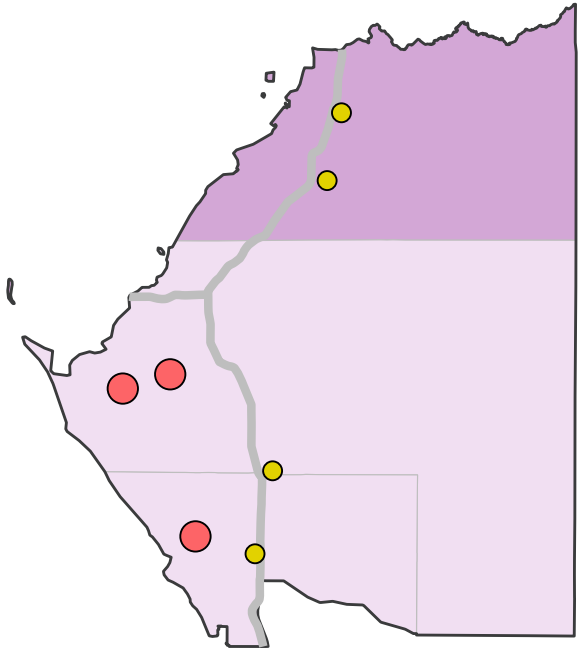
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 16

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

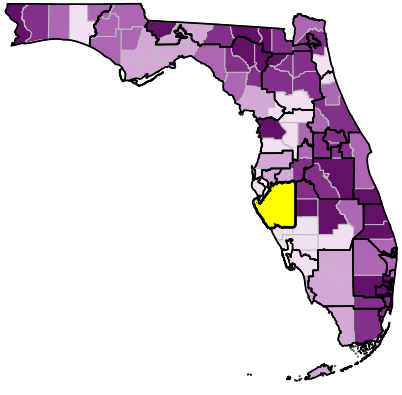
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 16

The map for Congressional District 16 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 76 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 16 (4 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253695

FLORIDA

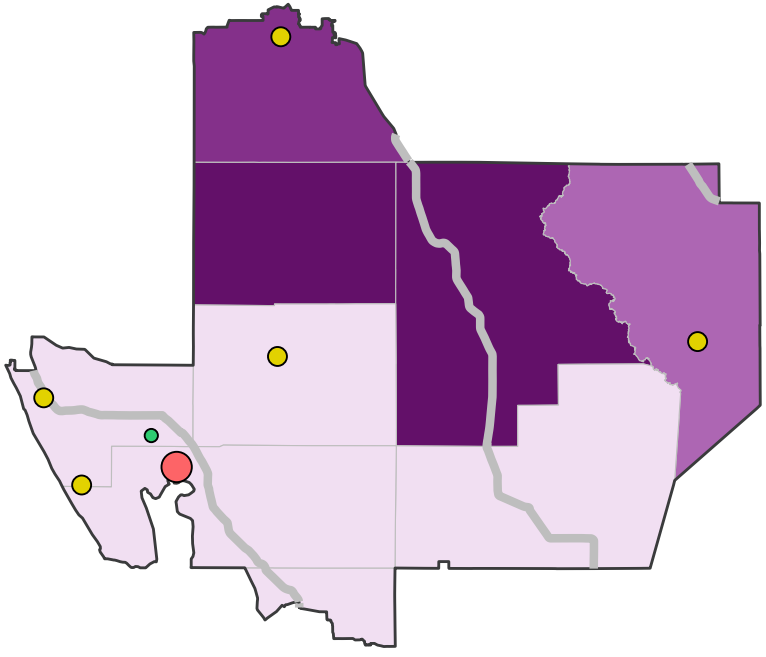
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 17



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

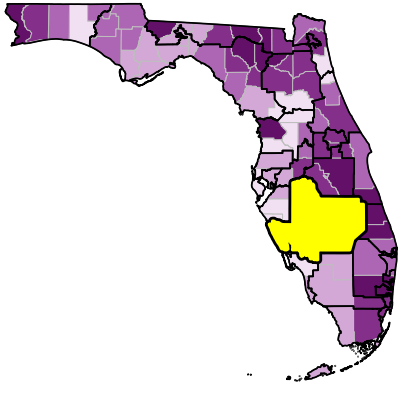
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 17

The map for Congressional District 17 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 143 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 17 (1 Acute, 5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253696

FLORIDA

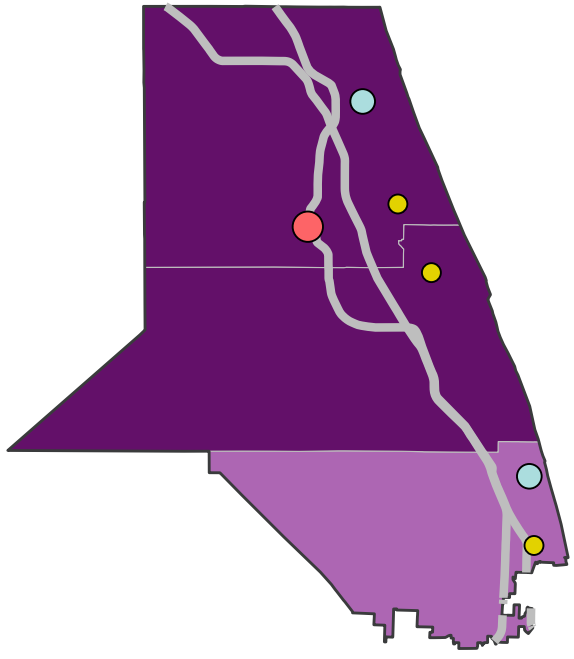
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 18

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

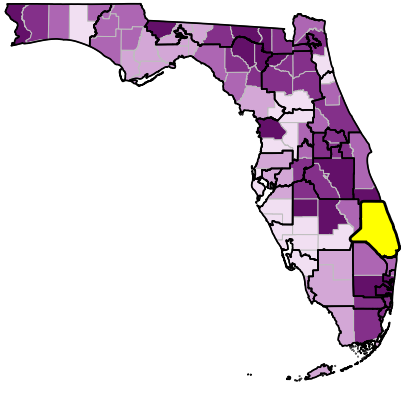
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 18

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 18

The map for Congressional District 18 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 88 − 130 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 18 (3 Primary, 2 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253697

FLORIDA

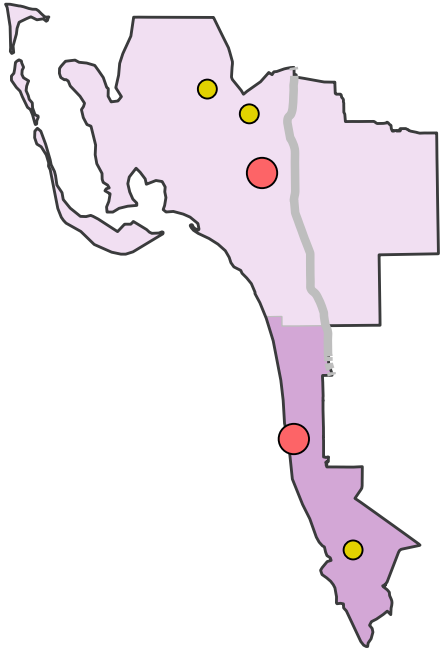
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 19

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

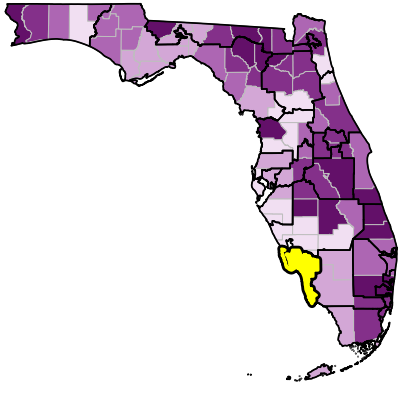
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 19

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 19

The map for Congressional District 19 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 80 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 19 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253698

FLORIDA

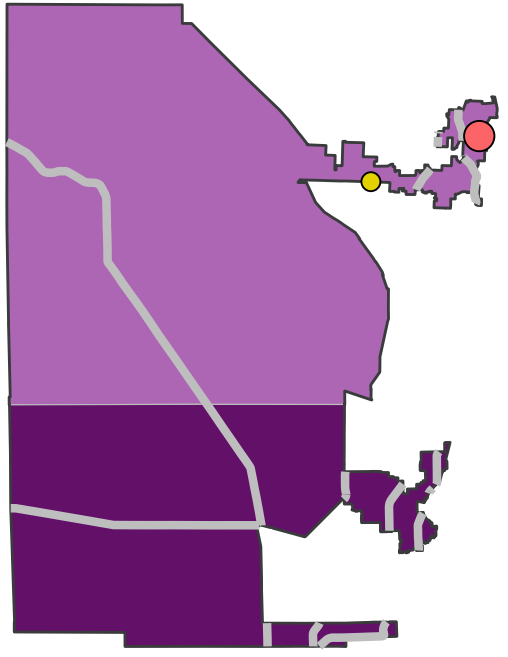
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 20

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

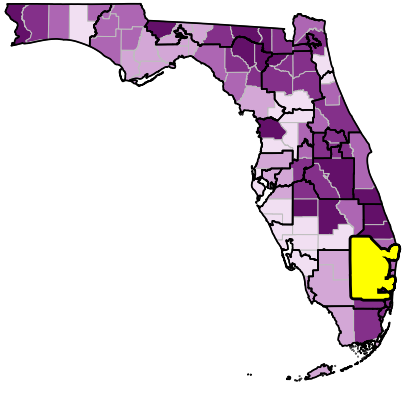
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 20

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 20

The map for Congressional District 20 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 88 − 114 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 20 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253699

FLORIDA

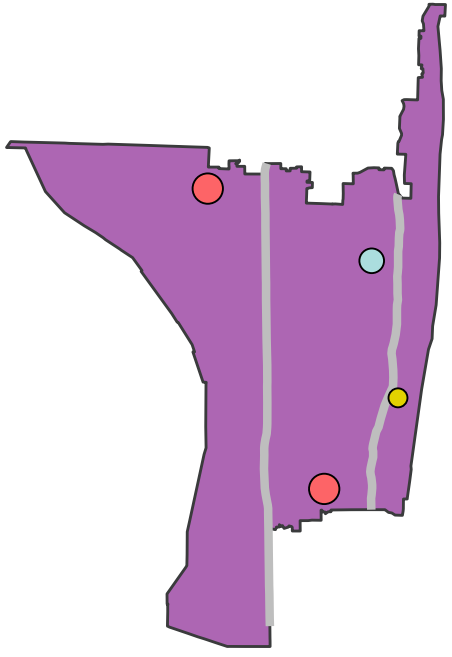
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 21

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

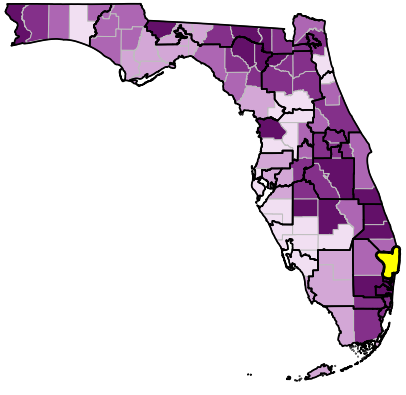
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 21

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 21

The map for Congressional District 21 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for Palm Beach County, the single county represented in the district, is 88 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 21 (1 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253700

FLORIDA

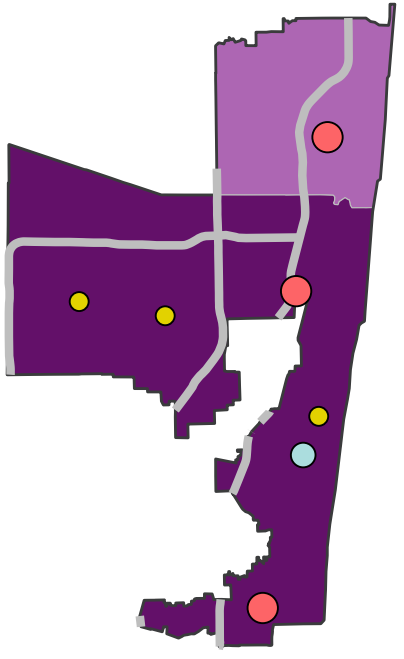
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 22



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

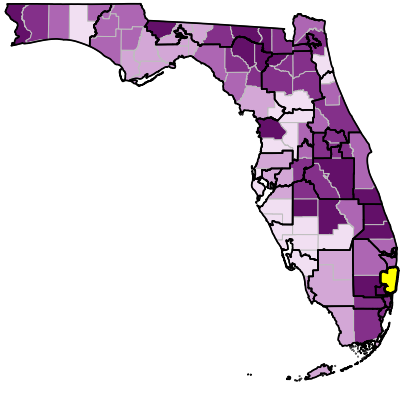
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 22

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 22

The map for Congressional District 22 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 88 − 114 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 22 (3 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253701

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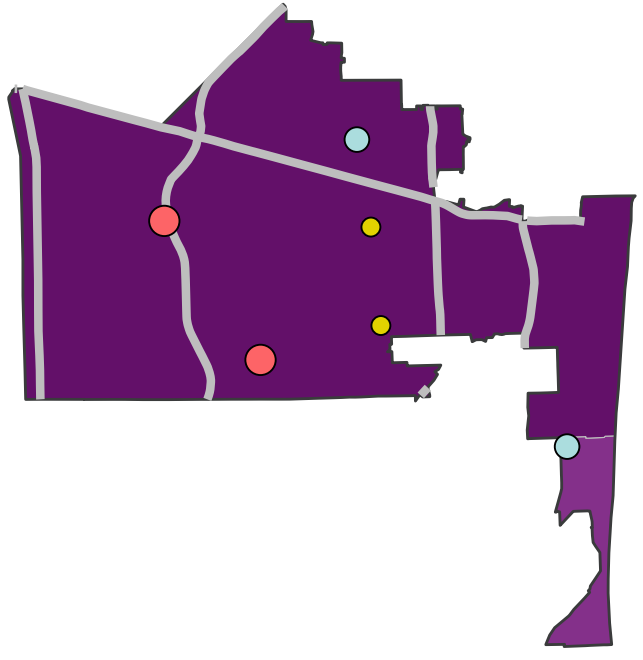
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 23

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

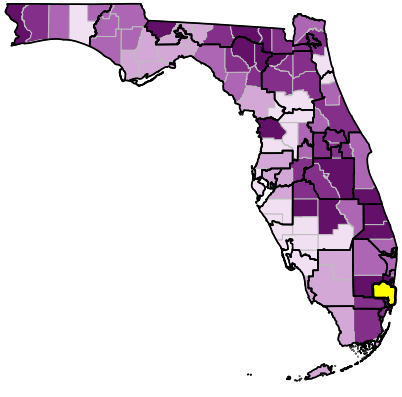
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 23

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 23

The map for Congressional District 23 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 103 − 114 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 23 (2 Primary, 2 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253702

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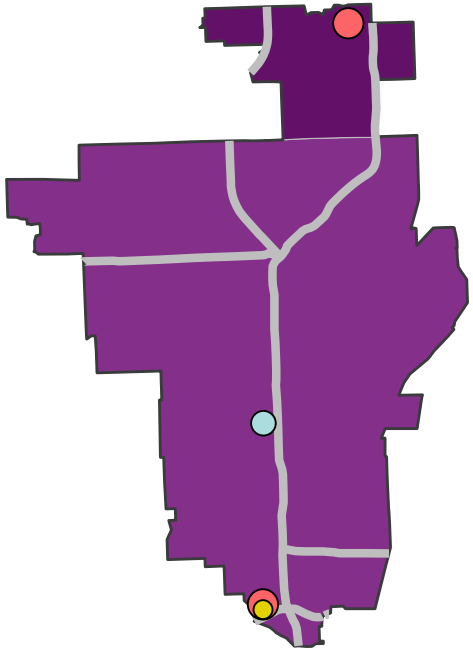
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 24

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

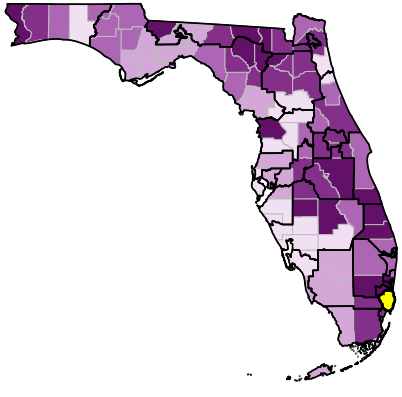
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 24

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 24

The map for Congressional District 24 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 103 − 114 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 24 (1 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253703

FLORIDA

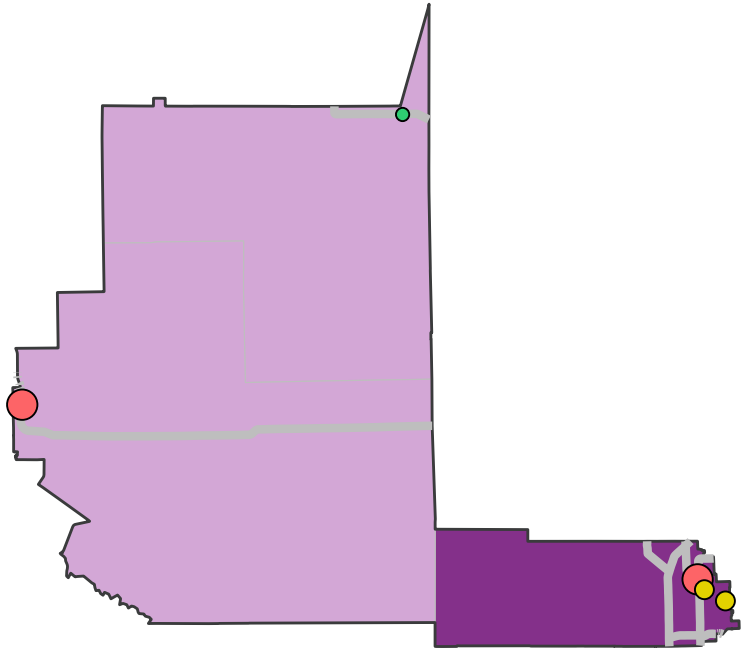
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 25

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

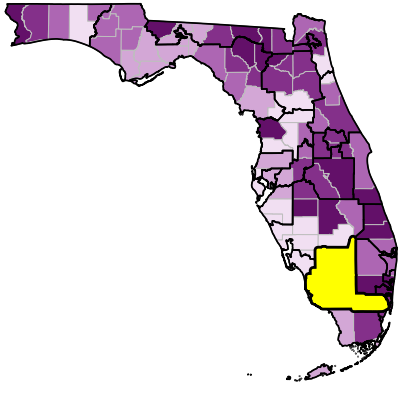
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 25

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 25

The map for Congressional District 25 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 103 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 25 (1 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253704

FLORIDA

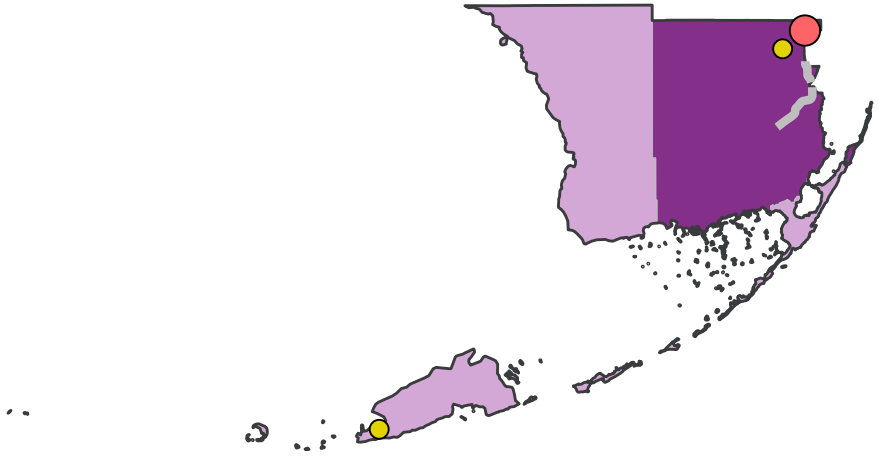
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 26



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

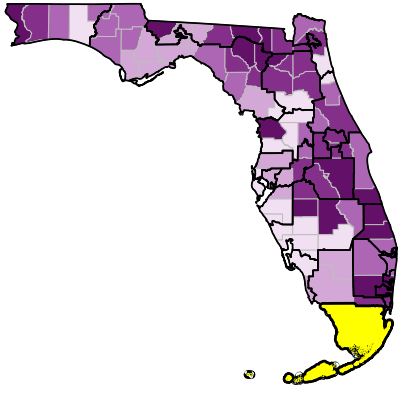
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 26

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 26

The map for Congressional District 26 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 103 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 26 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253705

FLORIDA

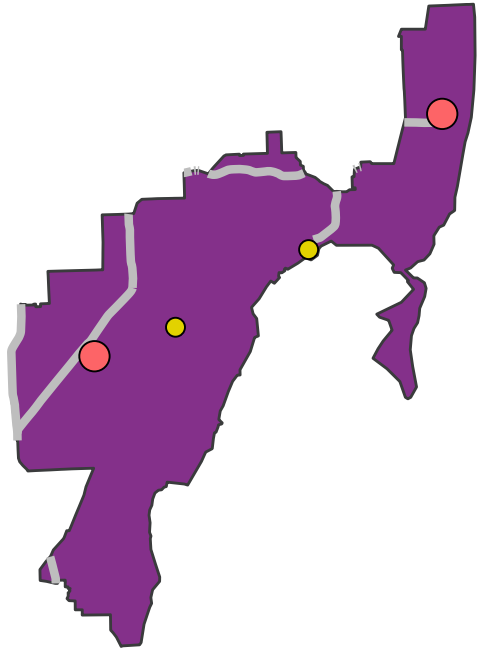
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 27

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

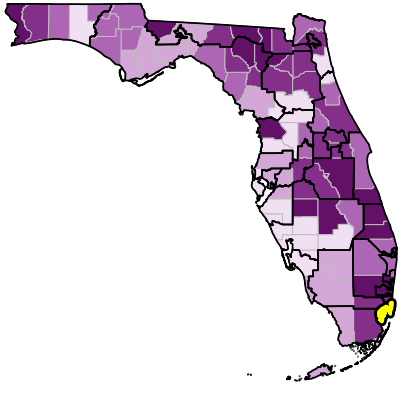
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 27

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 27

The map for Congressional District 27 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for Miami−Dade County, the single county represented in the district, is 103 per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 27 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253706

FLORIDA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 28

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 75
- 75 − 84
- 84 − 98
- 98 − 112
- 112 − 143
- County*

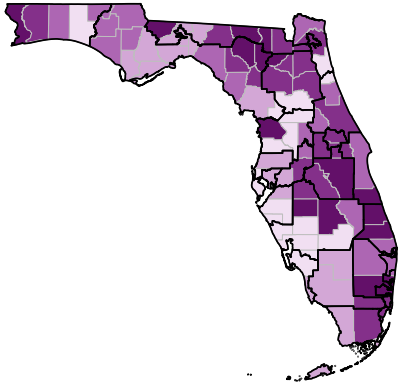
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Florida

92 per 100,000 persons



Congressional District 28

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FLORIDA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Florida Congressional District 28

The map for Congressional District 28 in Florida shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Florida and the United States, stroke death rates are 92 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 28 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253707

GEORGIA

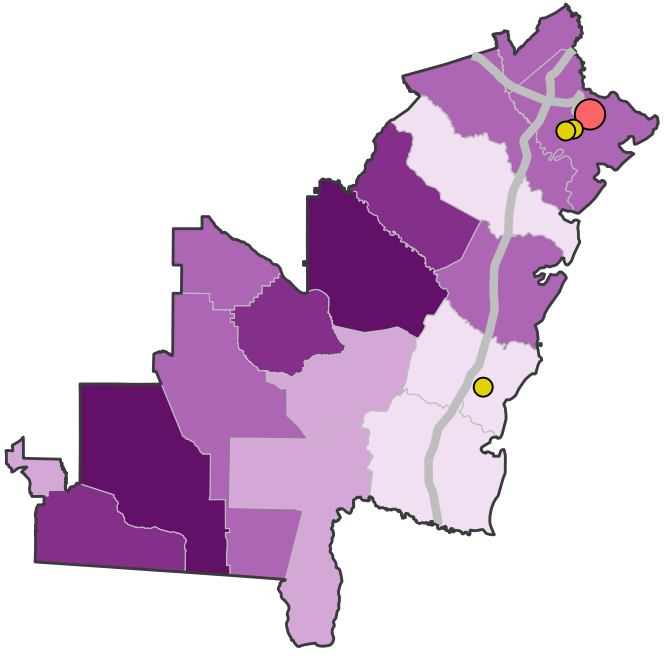
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

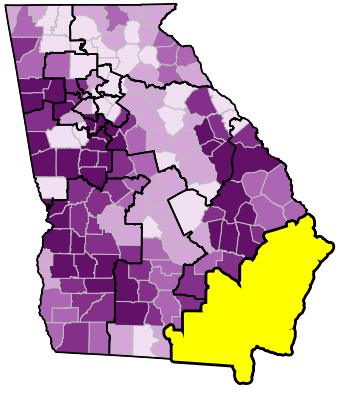
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 1

The map for Congressional District 1 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 112 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253708

GEORGIA

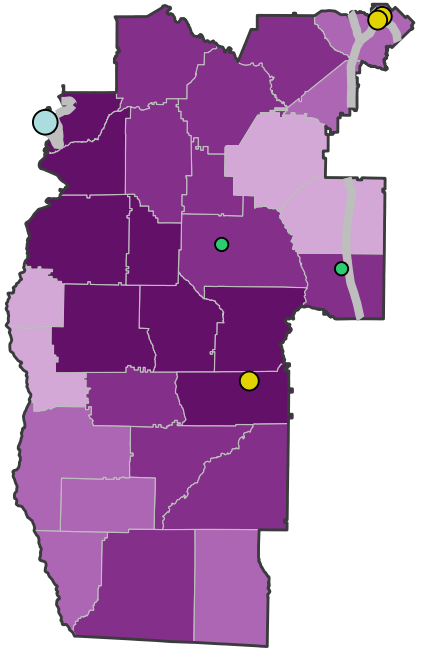
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

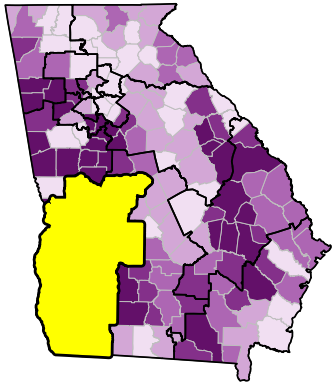
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 2

The map for Congressional District 2 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 123 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (2 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253709

GEORGIA

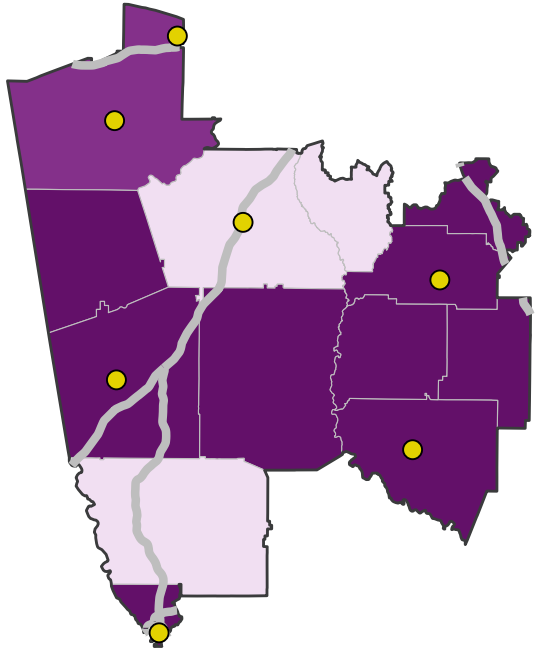
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

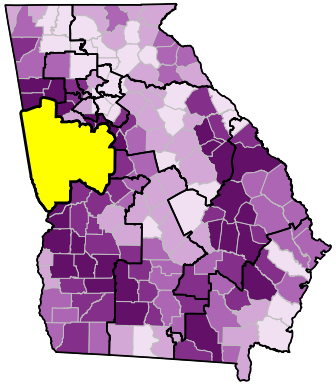
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 3

The map for Congressional District 3 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 166 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 3 (7 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253710

GEORGIA

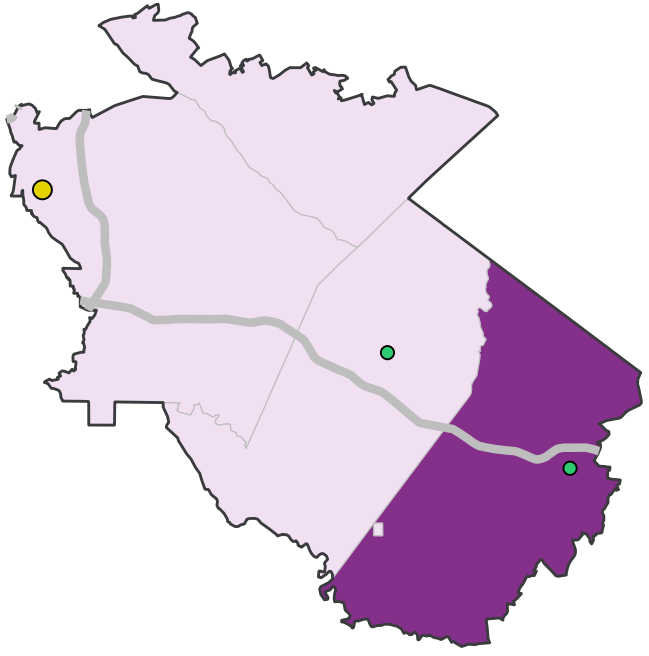
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

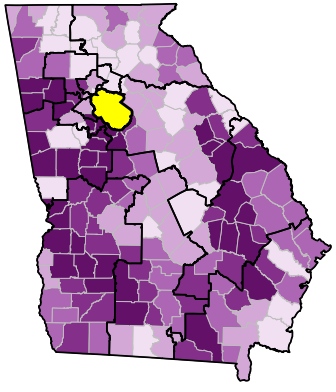
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 4

The map for Congressional District 4 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 103 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (2 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253711

GEORGIA

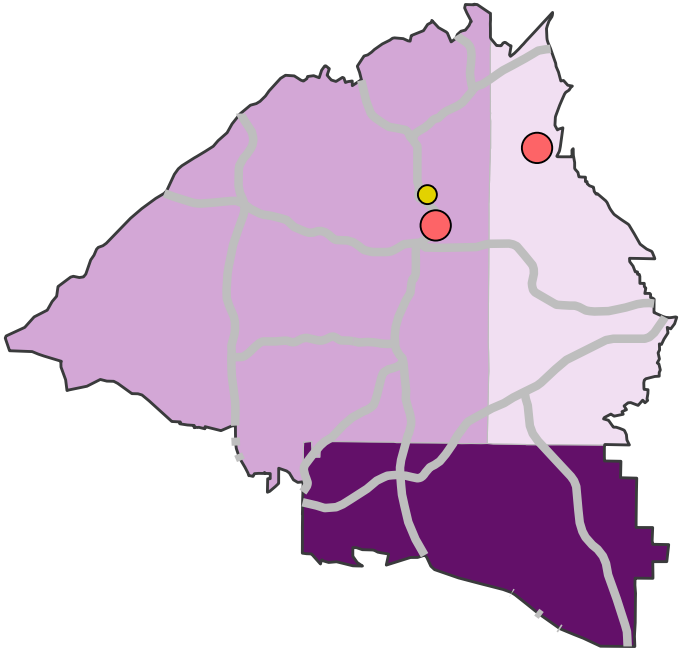
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

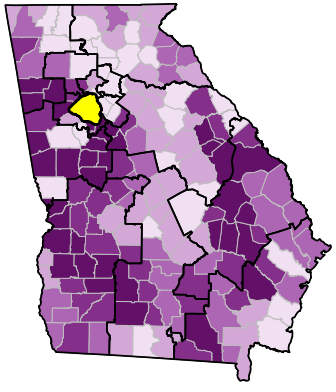
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 5

The map for Congressional District 5 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 107 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 5 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253712

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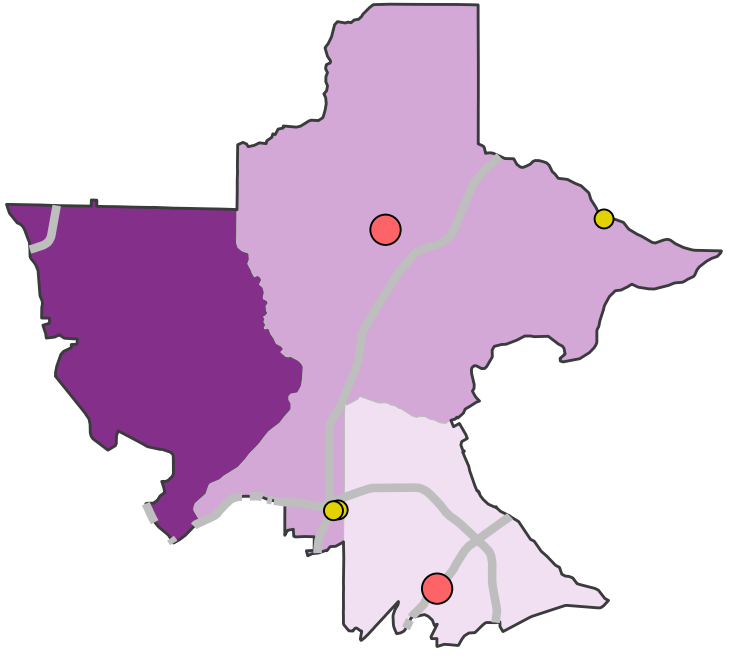
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

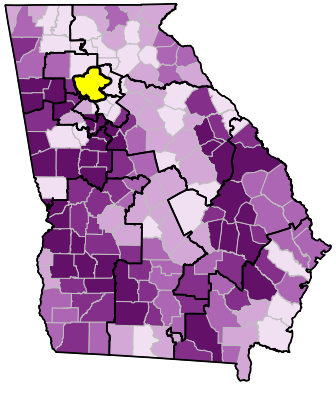
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 6

The map for Congressional District 6 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 97 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253713

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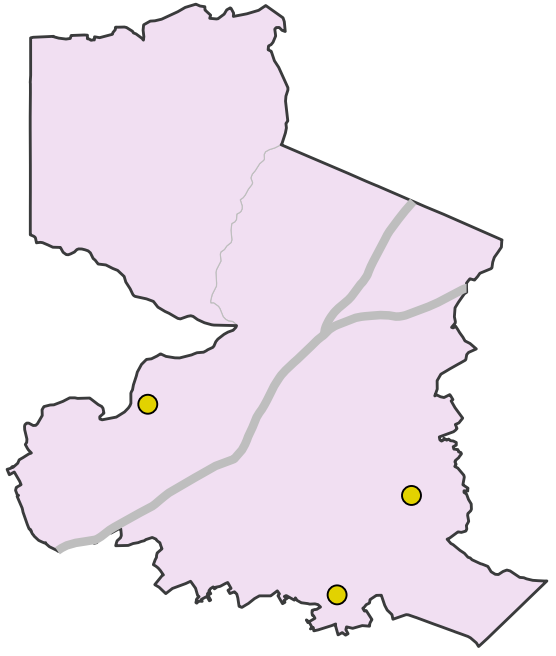
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

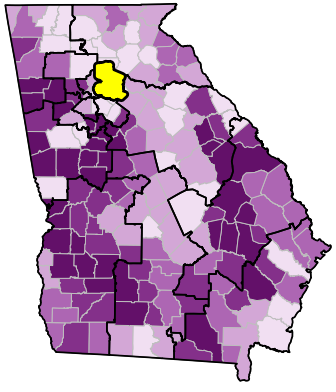
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 7

The map for Congressional District 7 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 78 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 7 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253714

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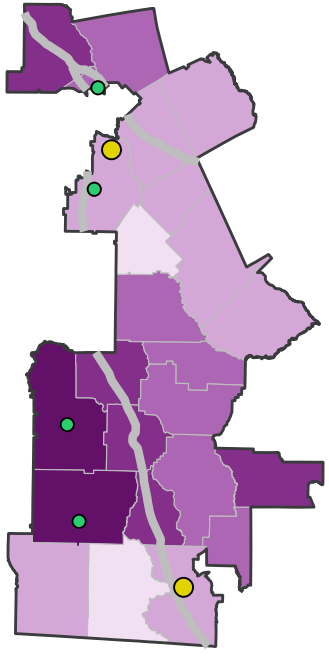
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

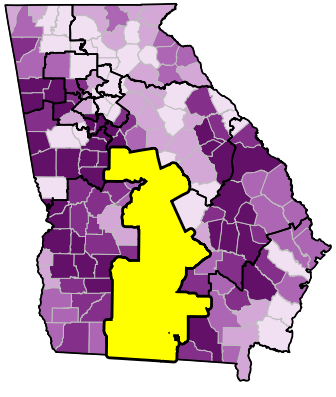
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 8

The map for Congressional District 8 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 111 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 8 (4 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253715

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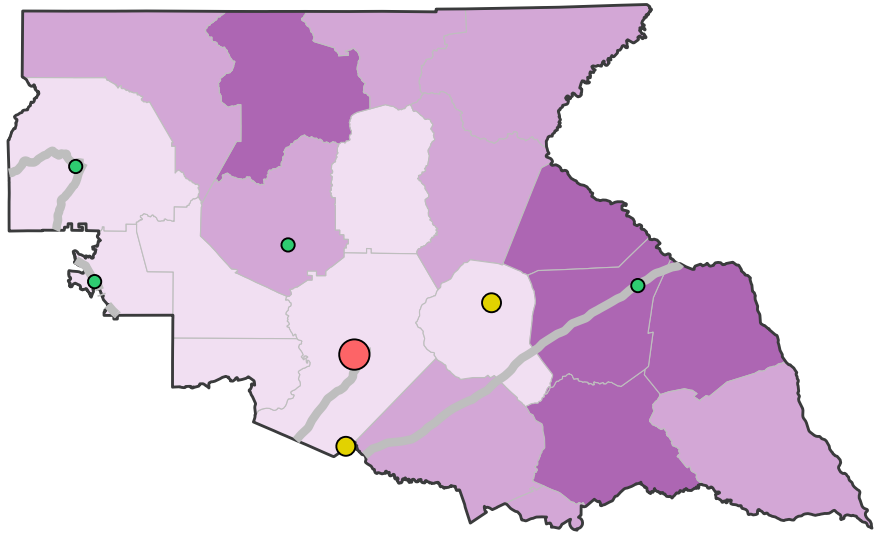
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

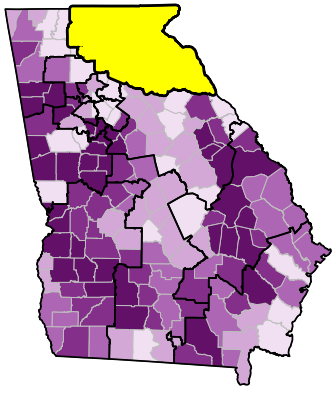
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 9

The map for Congressional District 9 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 94 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 9 (4 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253716

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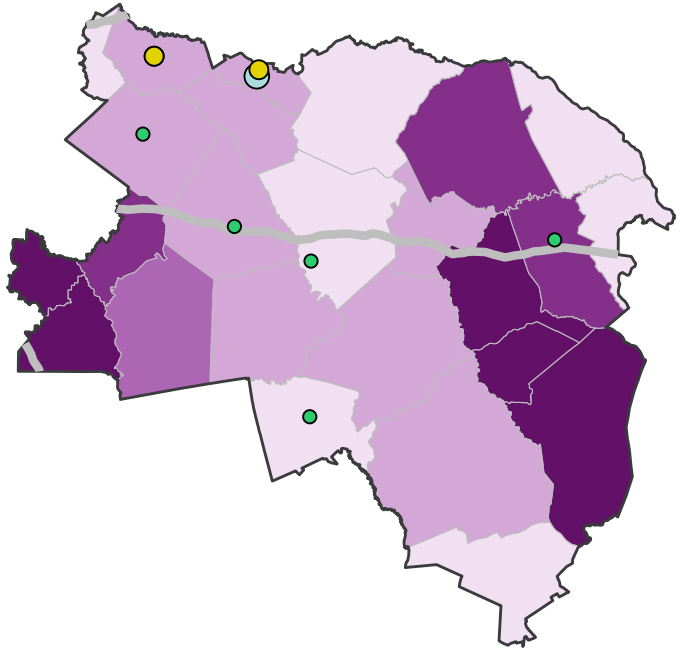
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

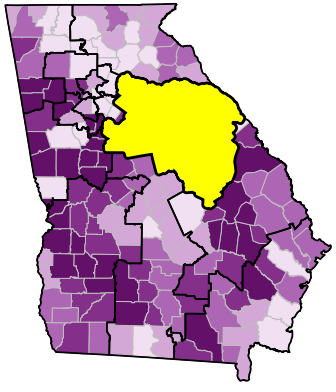
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 10

The map for Congressional District 10 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 118 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 10 (5 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253717

GEORGIA

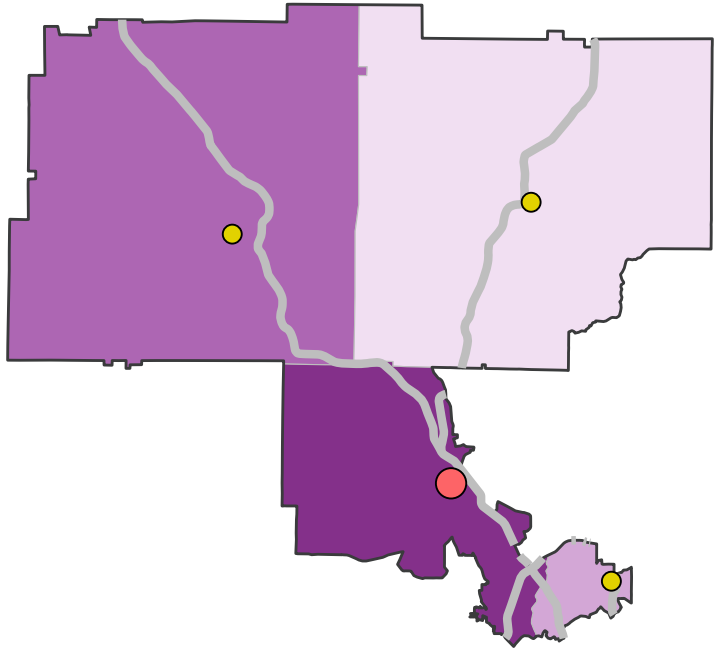
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

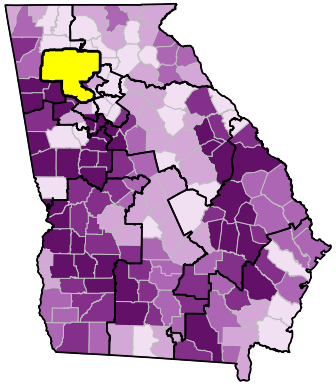
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 11

The map for Congressional District 11 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 97 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 11 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253718

GEORGIA

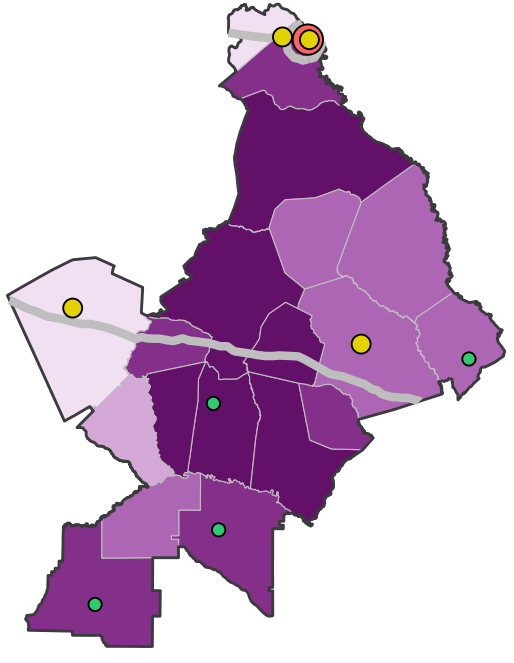
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

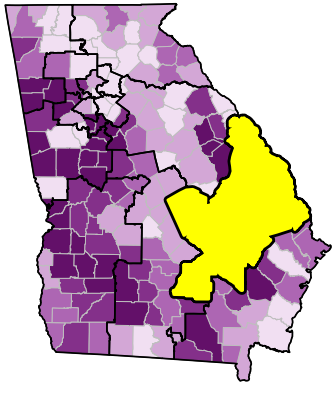
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 12

The map for Congressional District 12 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 115 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 12 (4 Acute, 4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253719

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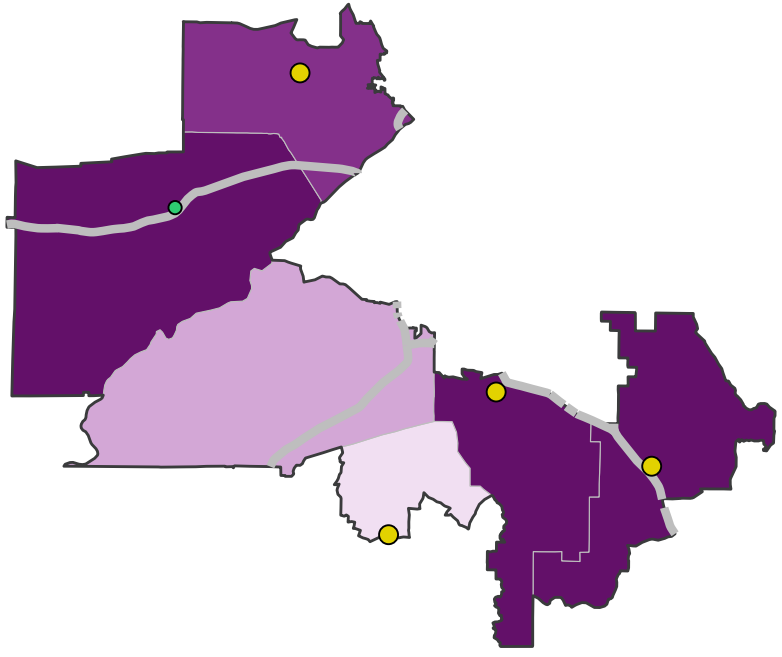
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

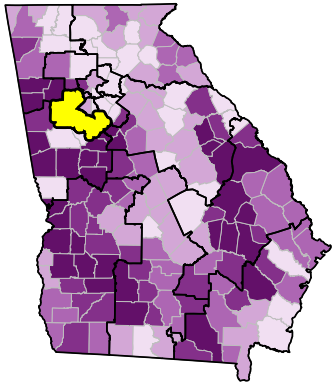
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 13

The map for Congressional District 13 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 120 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 13 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253720

GEORGIA

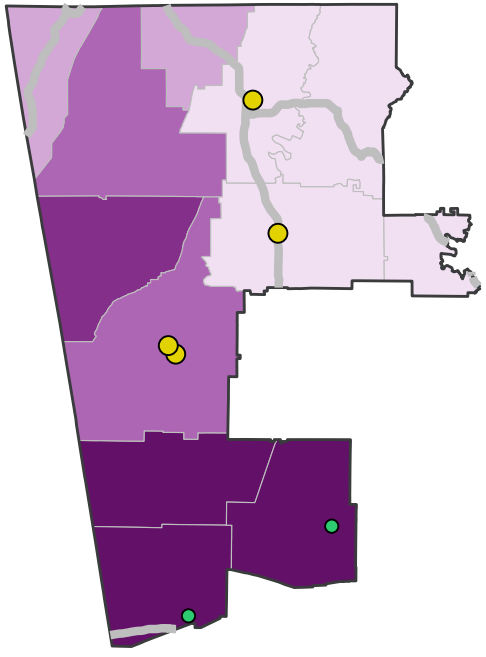
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 81
- 81 − 87
- 87 − 95
- 95 − 107
- 107 − 166

- County*
- Highway

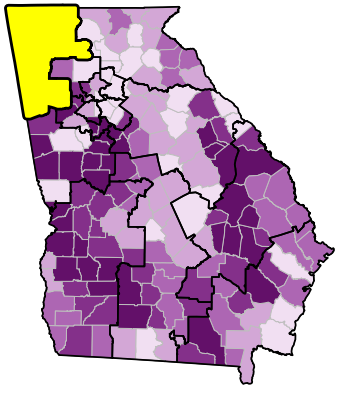
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Georgia

93 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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GEORGIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Georgia Congressional District 14

The map for Congressional District 14 in Georgia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 112 per 100,000. For Georgia and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 14 (2 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253721

HAWAII

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 70
- 76
- 88
- 96
- 101

County*
Highway

Stroke Centers

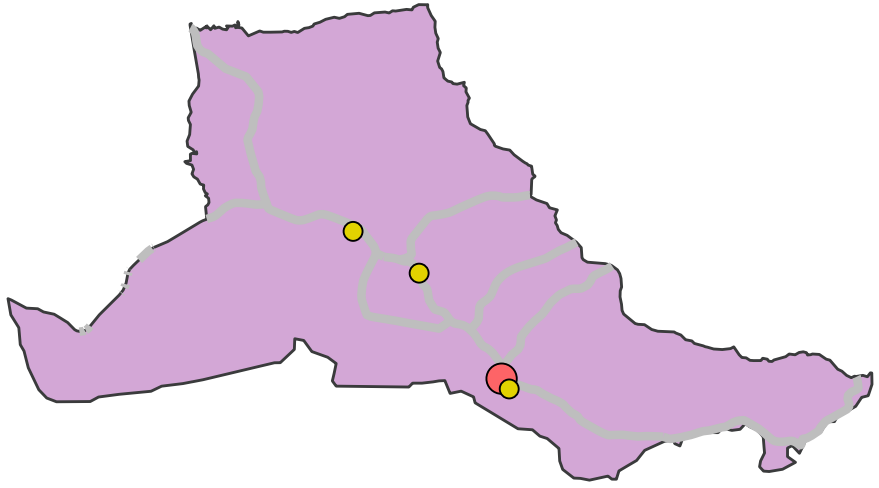
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

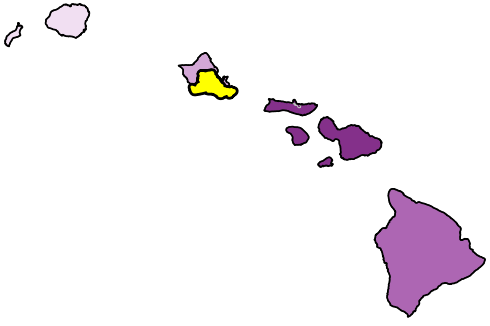
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Hawaii

86 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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HAWAII

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Hawaii Congressional District 1

The map for Congressional District 1 in Hawaii shows that stroke death rates (ages 35+, 2021 − 2023) for Honolulu County, the single county represented in the district, is 76 per 100,000. For Hawaii and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253722

HAWAII

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 70
- 76
- 88
- 96
- 101

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

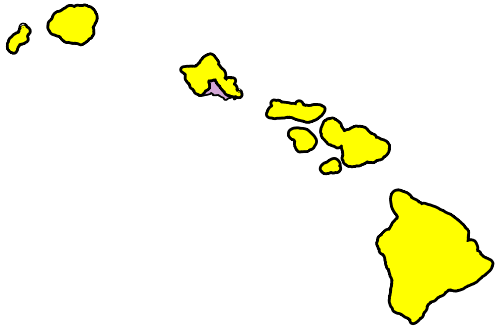
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

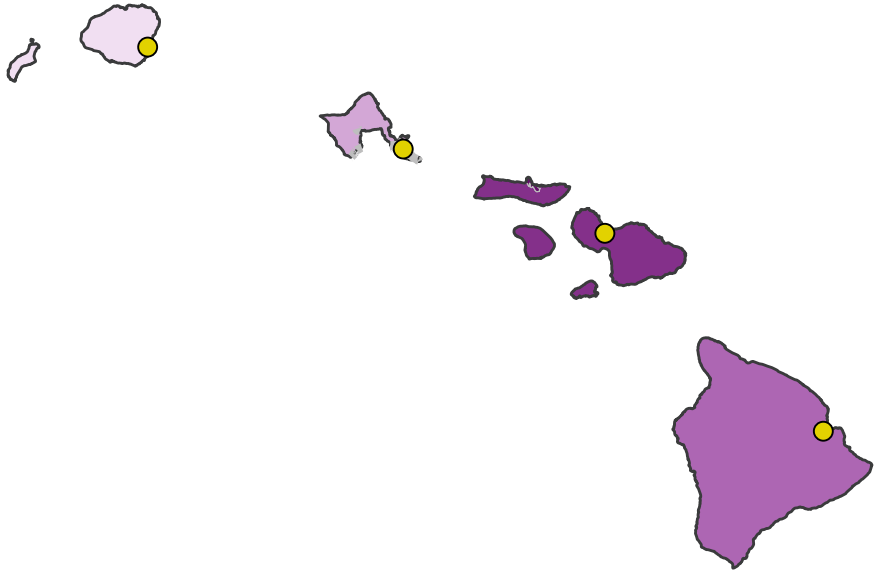
Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Hawaii

86 per 100,000 persons



Congressional District 2



*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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HAWAII

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Hawaii Congressional District 2

The map for Congressional District 2 in Hawaii shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 101 per 100,000. For Hawaii and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253723

IDAHO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 18 − 57
- 57 − 63
- 63 − 70
- 70 − 78
- 78 − 103

- County*
- Highway

Stroke Centers

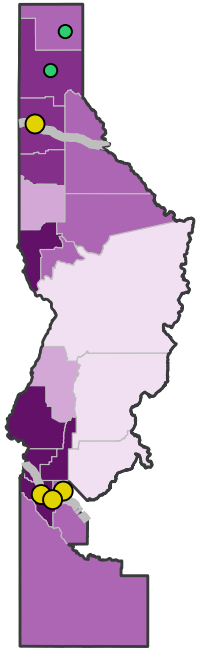
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

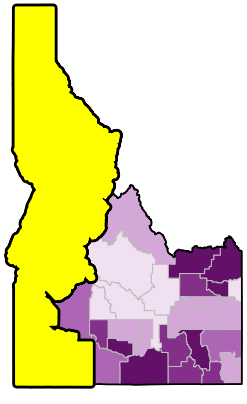
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Idaho

67 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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IDAHO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Idaho Congressional District 1

The map for Congressional District 1 in Idaho shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 23 − 91 per 100,000. For Idaho and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (2 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253724

IDAHO

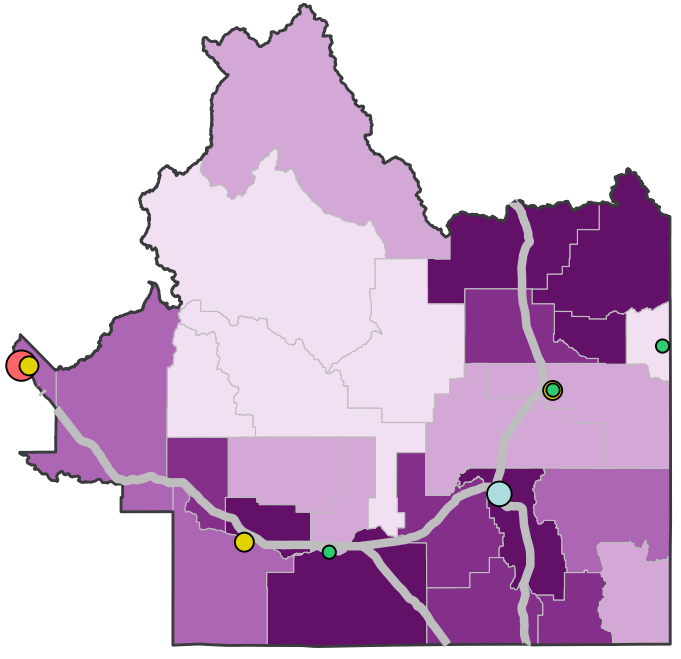
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 18 − 57
- 57 − 63
- 63 − 70
- 70 − 78
- 78 − 103

- County*
- Highway

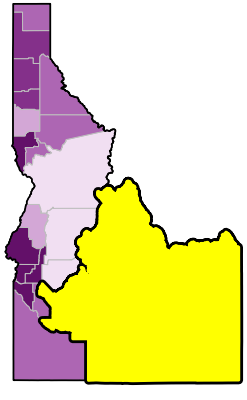
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Idaho

67 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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IDAHO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Idaho Congressional District 2

The map for Congressional District 2 in Idaho shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 18 − 103 per 100,000. For Idaho and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 2 (3 Acute, 3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253725

ILLINOIS

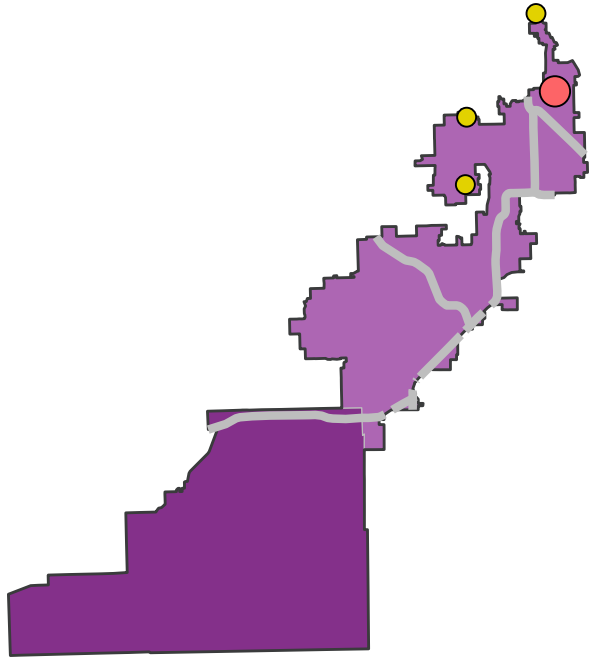
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

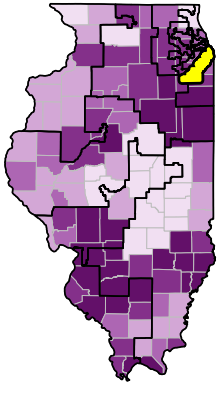
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 1

The map for Congressional District 1 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 89 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253726

ILLINOIS

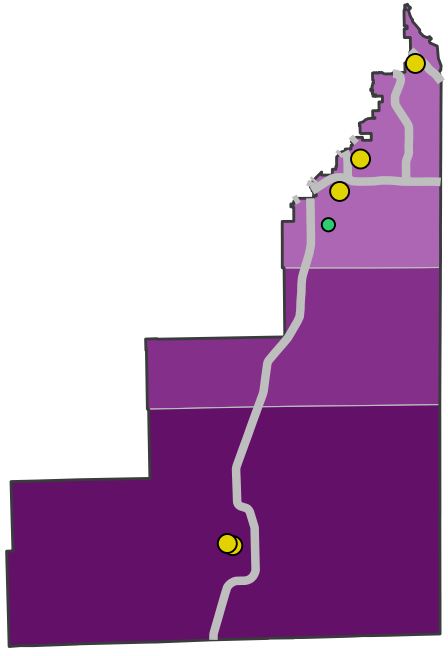
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

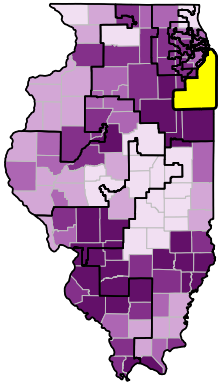
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 2

The map for Congressional District 2 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 100 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253727

ILLINOIS

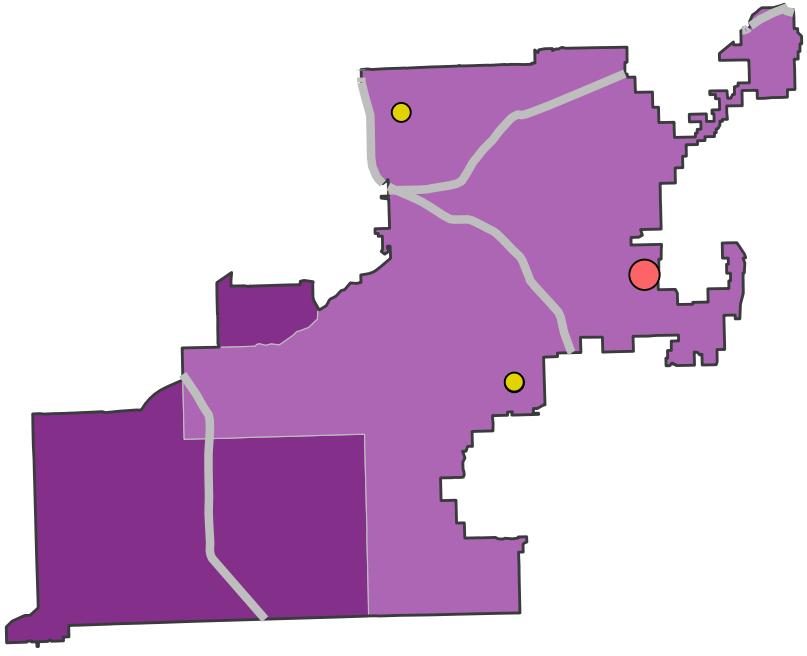
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

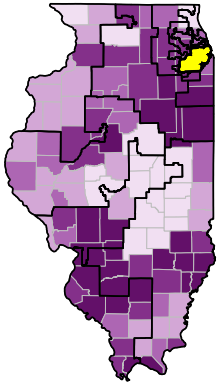
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 3

The map for Congressional District 3 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 89 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253728

ILLINOIS

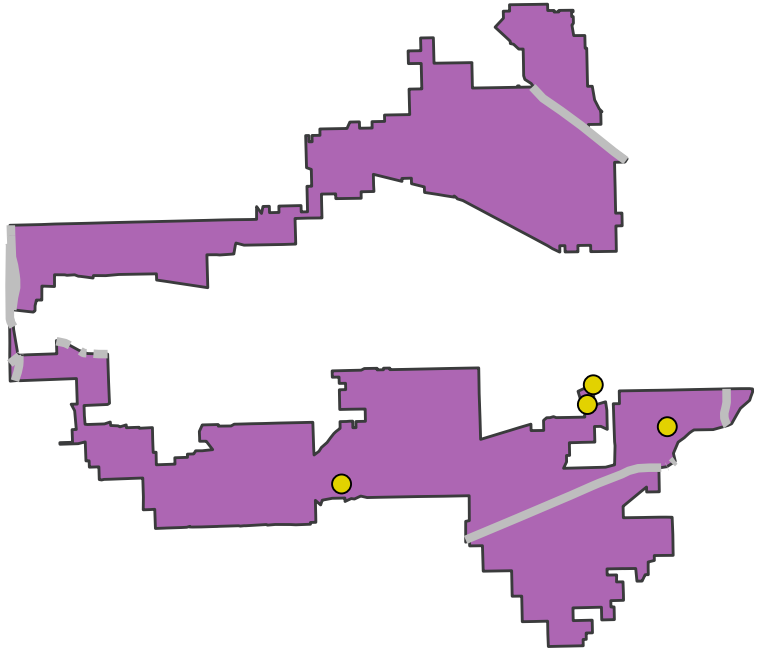
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

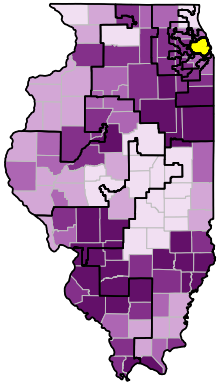
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 4

The map for Congressional District 4 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for Cook County, the single county represented in the district, is 83 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 4 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253729

ILLINOIS

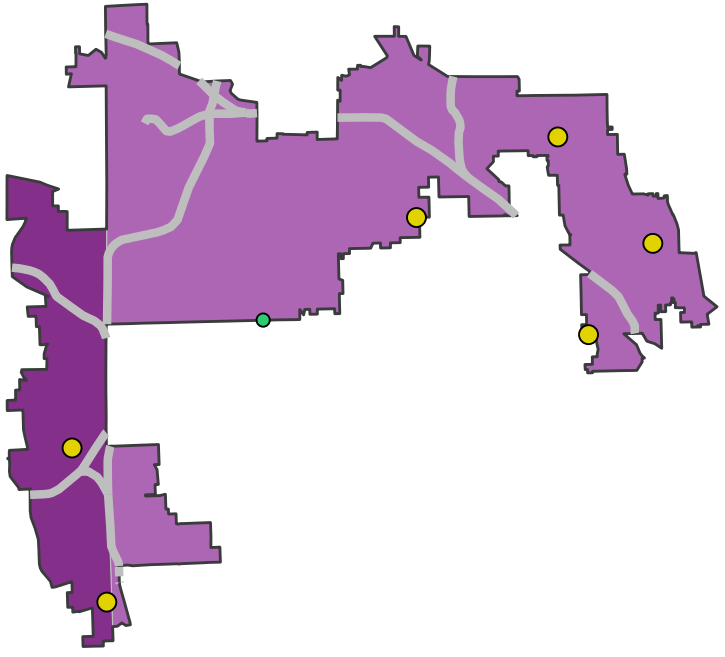
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

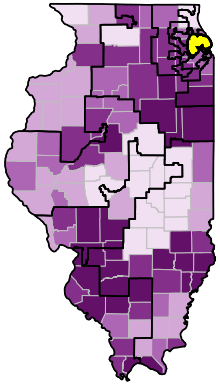
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 5

The map for Congressional District 5 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 86 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 5 (1 Acute, 6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253730

ILLINOIS

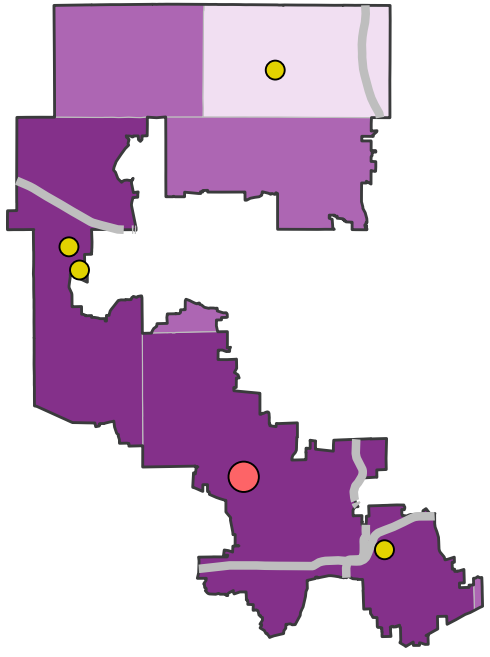
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

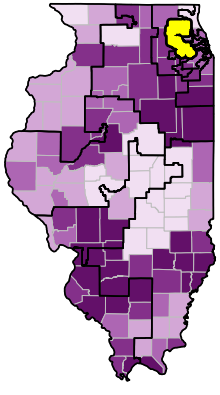
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 6

The map for Congressional District 6 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 90 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253731

ILLINOIS

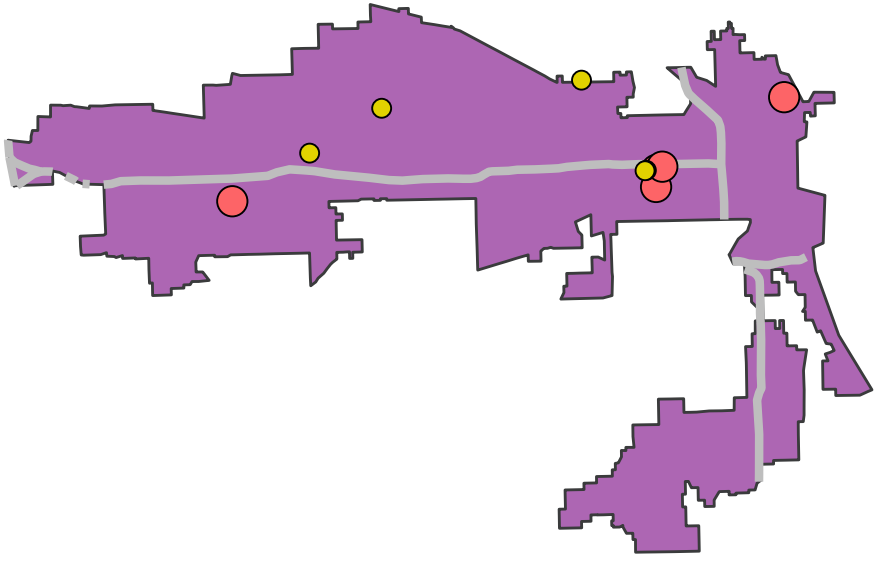
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

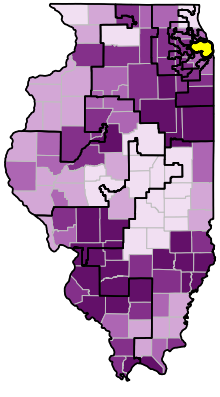
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 7

The map for Congressional District 7 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for Cook County, the single county represented in the district, is 83 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 7 (5 Primary, 5 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253732

ILLINOIS

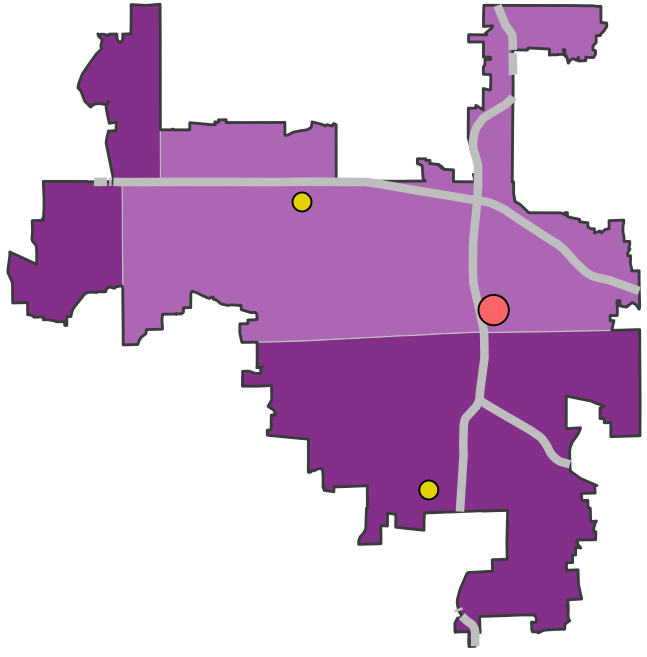
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

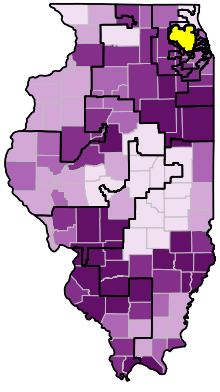
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 8

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 8

The map for Congressional District 8 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 90 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 8 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253733

ILLINOIS

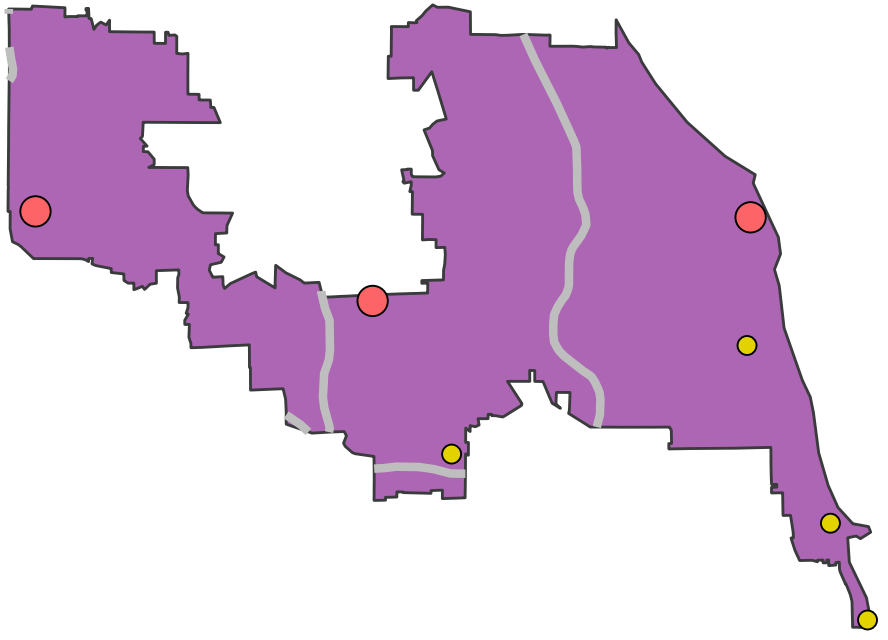
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

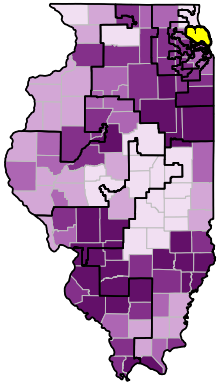
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 9

The map for Congressional District 9 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for Cook County, the single county represented in the district, is 83 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 9 (4 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253734

ILLINOIS

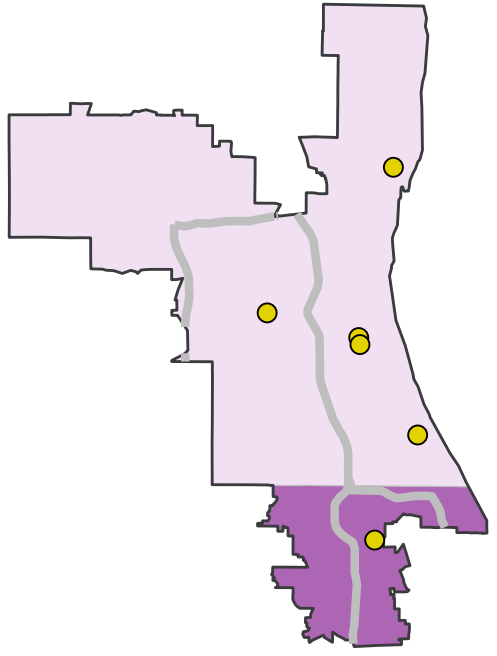
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

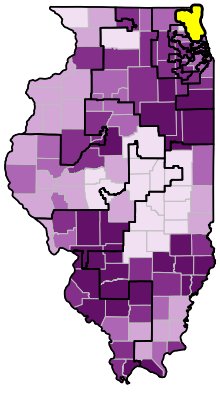
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 10

The map for Congressional District 10 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 83 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 10 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253735

ILLINOIS

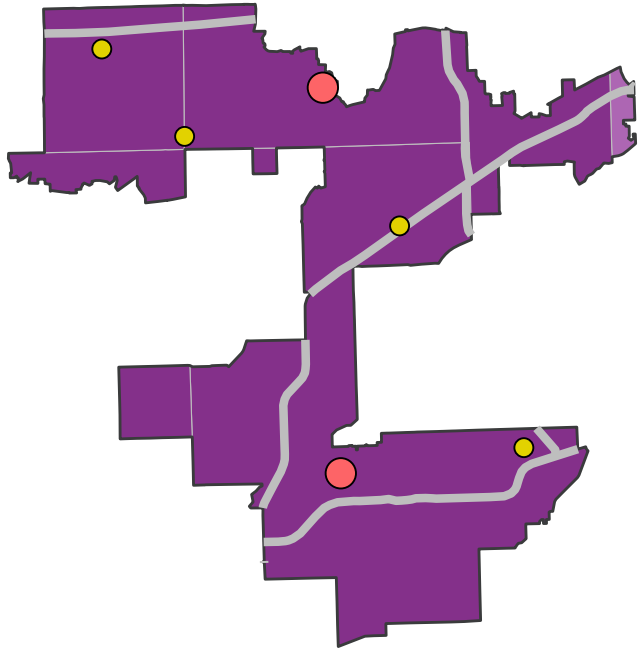
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

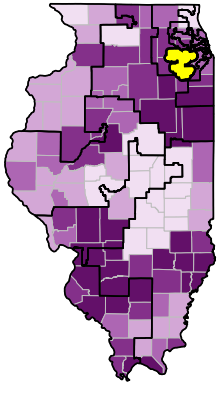
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 11

The map for Congressional District 11 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 90 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 11 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253736

ILLINOIS

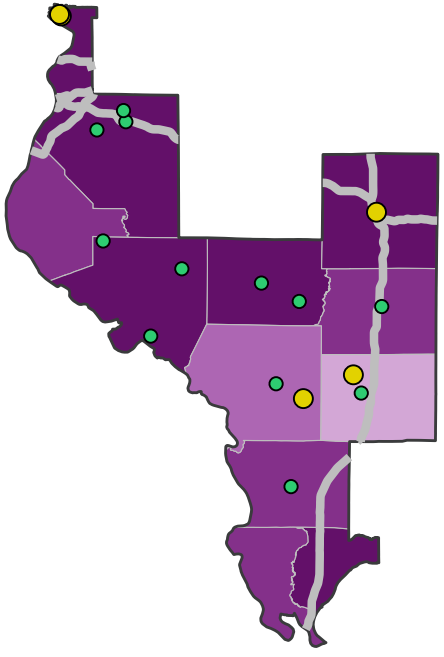
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

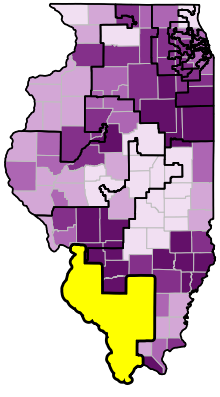
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 12

The map for Congressional District 12 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 126 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 17 stroke centers in District 12 (12 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253737

ILLINOIS

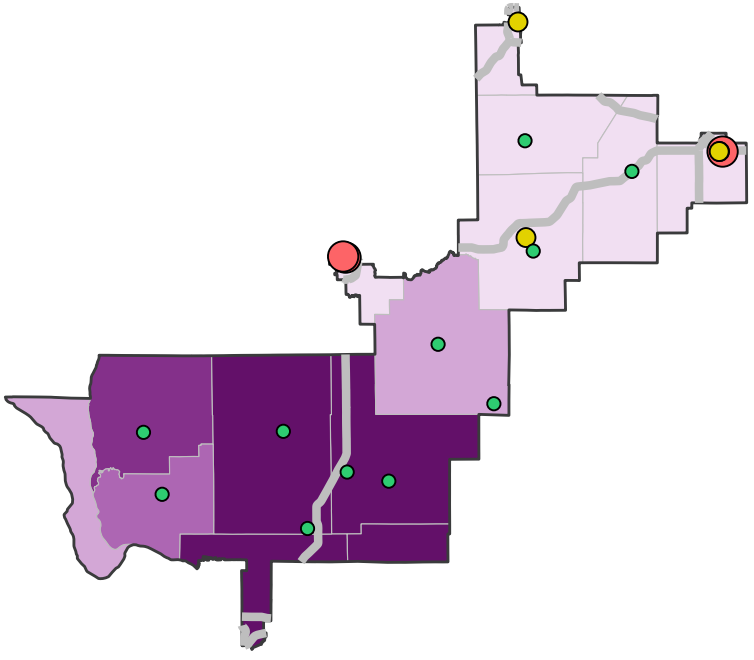
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

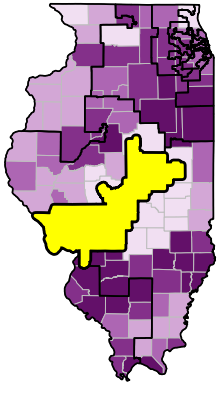
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 13

The map for Congressional District 13 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 126 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 18 stroke centers in District 13 (11 Acute, 4 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253738

ILLINOIS

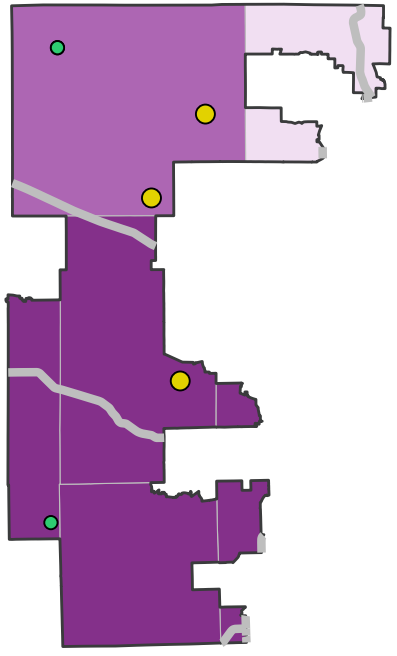
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

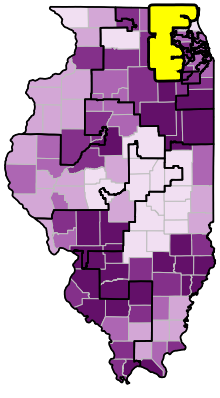
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 14

The map for Congressional District 14 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 90 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 14 (3 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253739

ILLINOIS

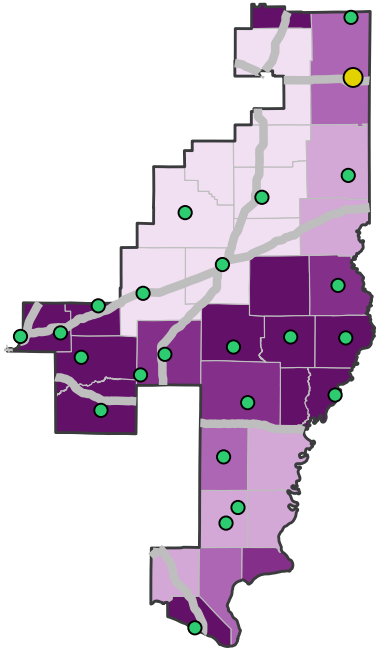
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 15

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

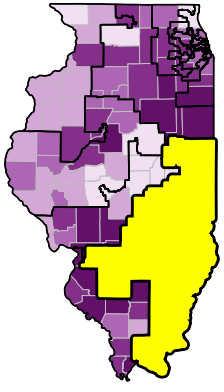
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 15

The map for Congressional District 15 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 126 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 24 stroke centers in District 15 (23 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253740

ILLINOIS

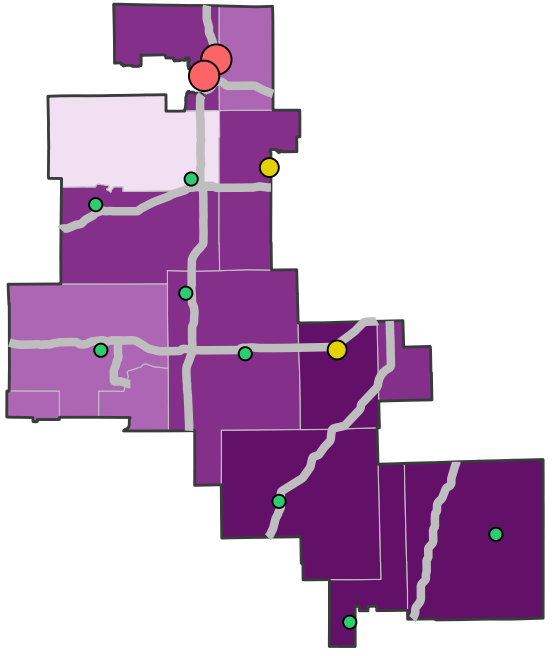
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 16

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

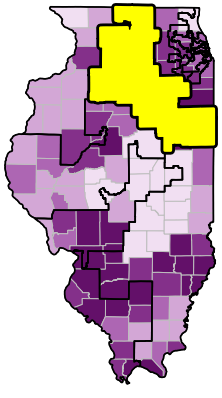
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 16

The map for Congressional District 16 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 105 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 12 stroke centers in District 16 (8 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253741

ILLINOIS

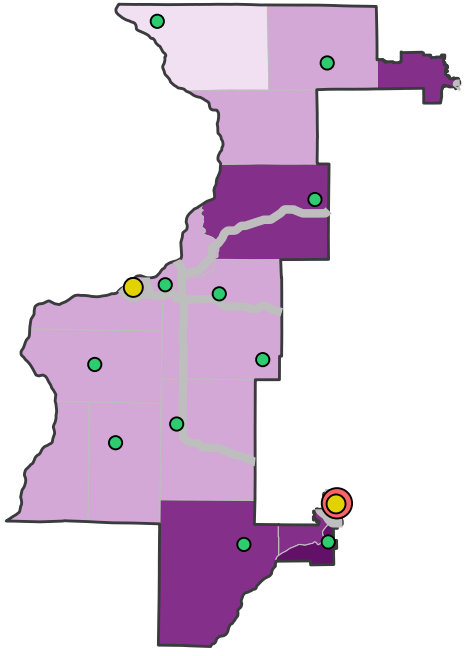
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 17

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

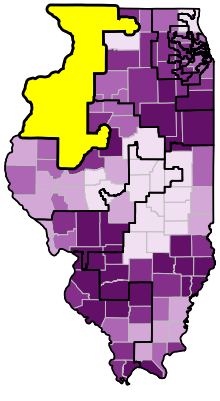
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 17

The map for Congressional District 17 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 66 − 94 per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 14 stroke centers in District 17 (11 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253742

ILLINOIS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 18

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 63 − 72
- 72 − 81
- 81 − 86
- 86 − 94
- 94 − 126

County*

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

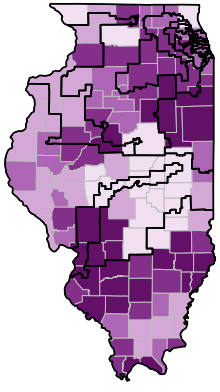
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Illinois

84 per 100,000 persons



Congressional District 18

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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ILLINOIS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Illinois Congressional District 18

The map for Congressional District 18 in Illinois shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Illinois and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 18 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

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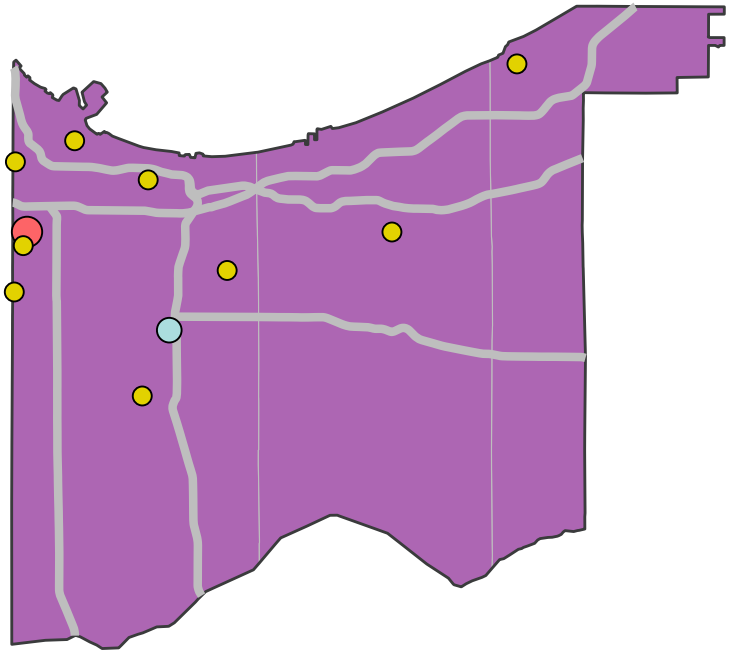
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

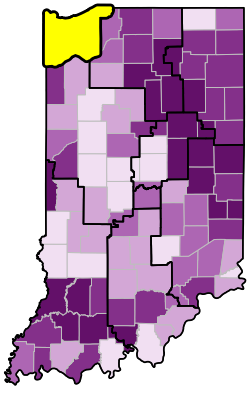
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 1

The map for Congressional District 1 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 82 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 11 stroke centers in District 1 (9 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253743

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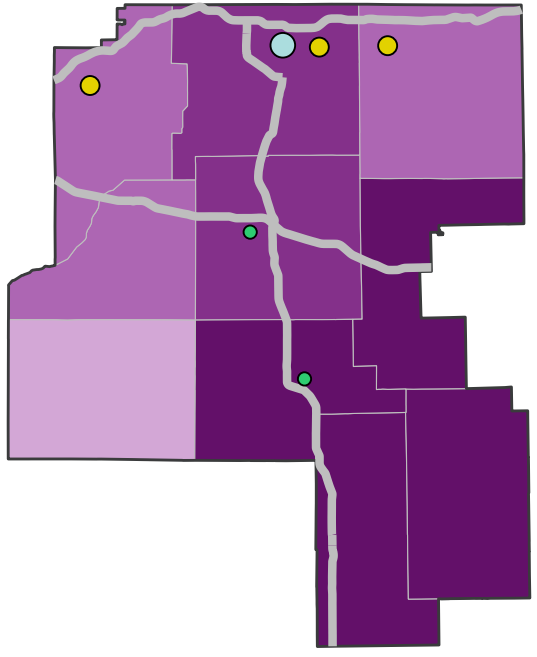
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

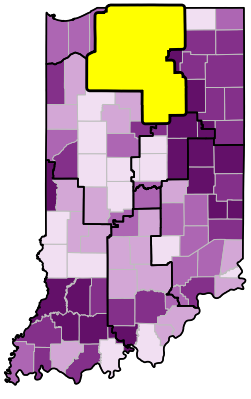
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 2

The map for Congressional District 2 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 102 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (2 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253744

INDIANA

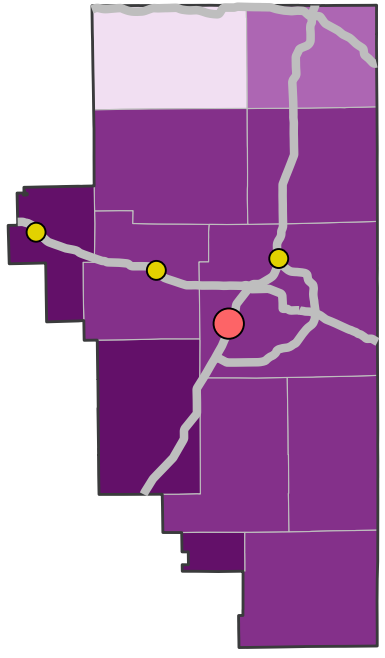
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

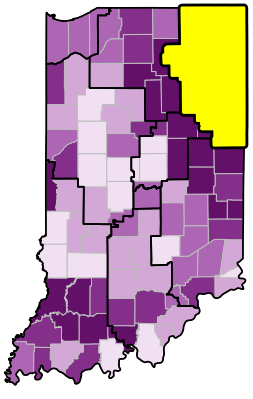
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 3

The map for Congressional District 3 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 108 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253745

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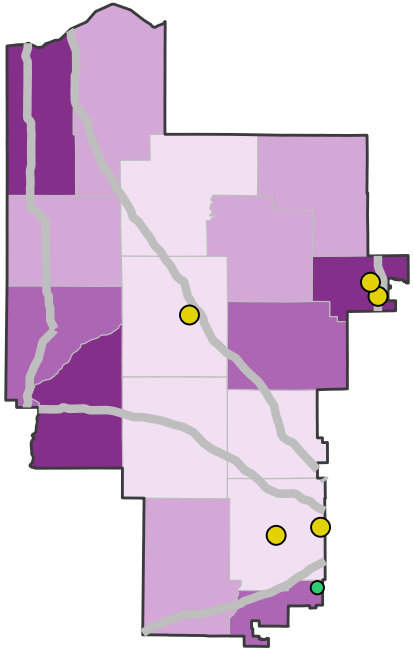
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

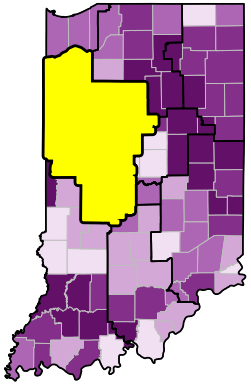
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 4

The map for Congressional District 4 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 92 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 4 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253746

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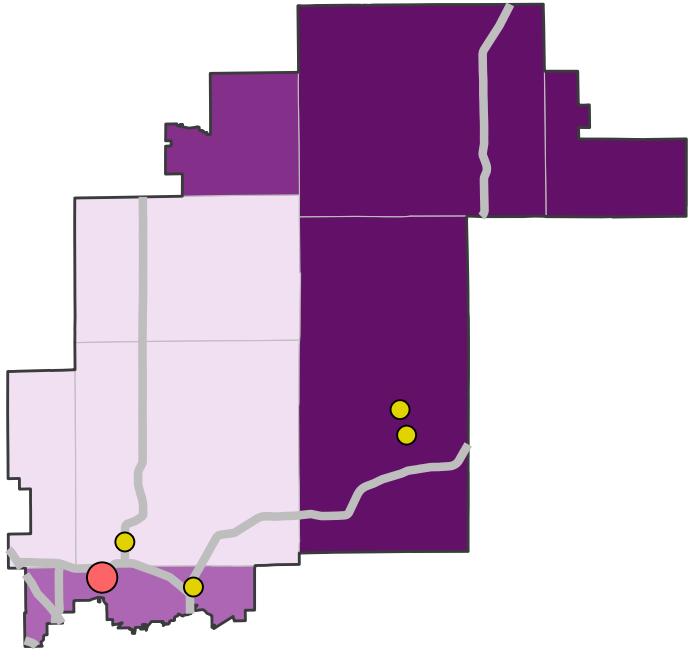
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

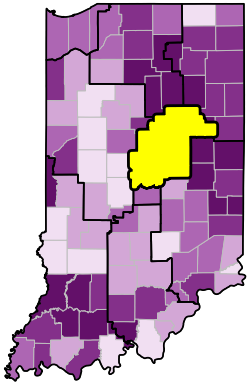
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 5

The map for Congressional District 5 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 108 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253747

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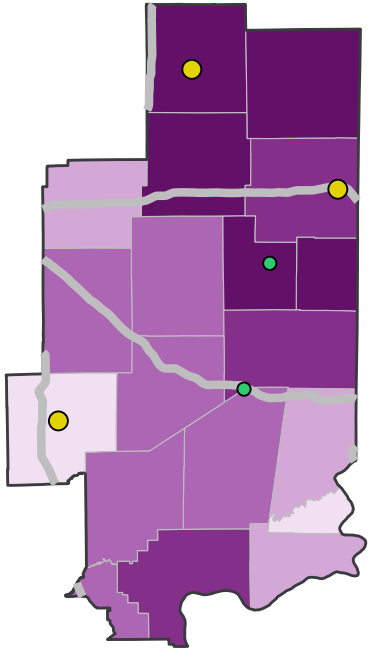
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

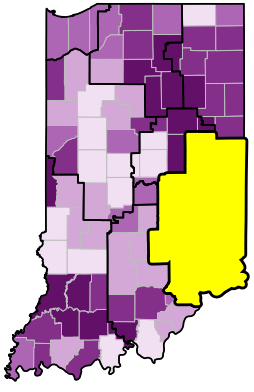
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 6

The map for Congressional District 6 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 111 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (2 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253748

INDIANA

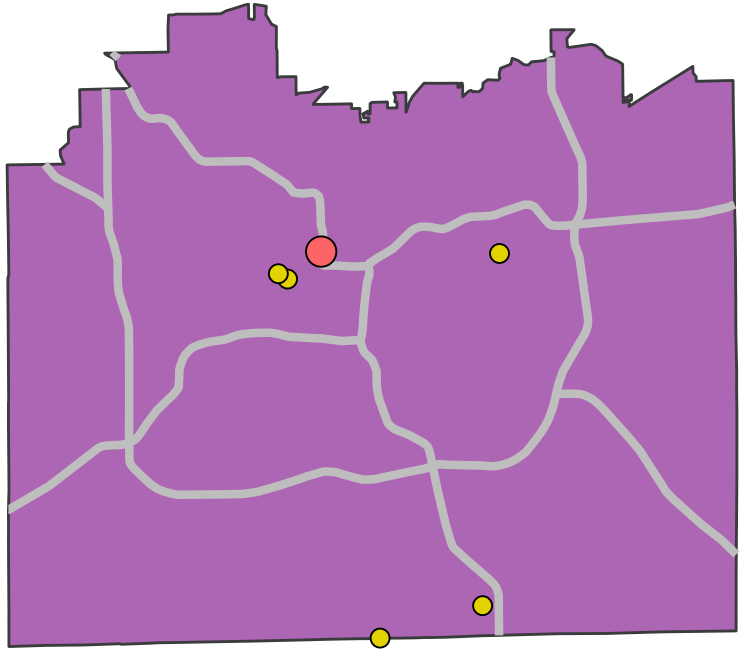
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

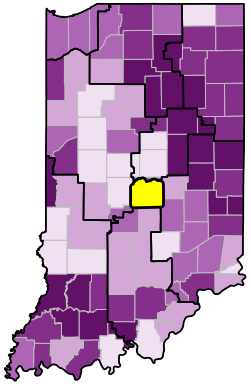
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 7

The map for Congressional District 7 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for Marion County, the single county represented in the district, is 81 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 7 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253749

INDIANA

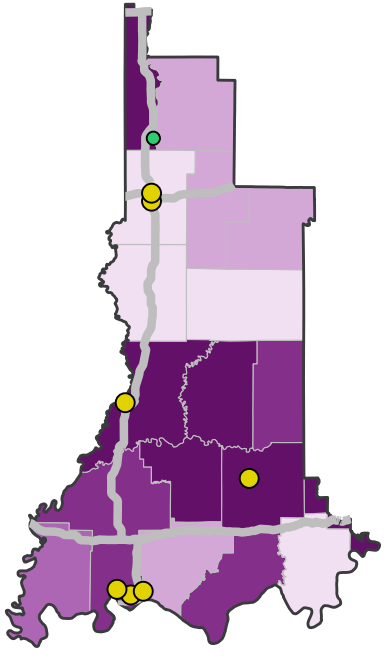
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

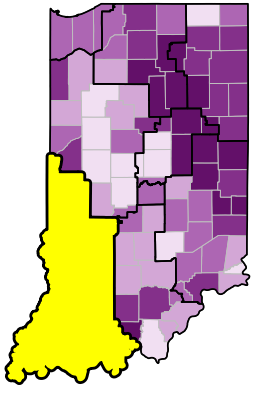
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 8

The map for Congressional District 8 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 116 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 8 (1 Acute, 7 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253750

INDIANA

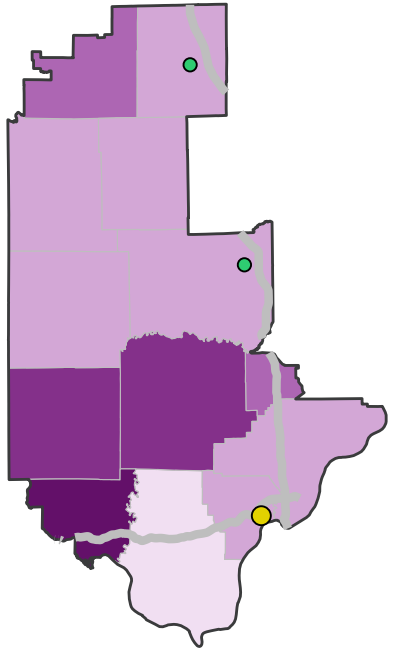
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 73
- 73 − 79
- 79 − 83
- 83 − 93
- 93 − 116

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

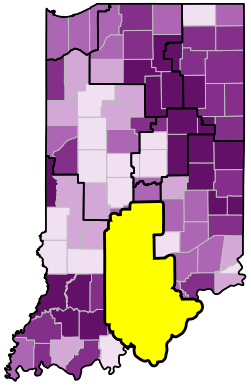
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Indiana

84 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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INDIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Indiana Congressional District 9

The map for Congressional District 9 in Indiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 111 per 100,000. For Indiana and the United States, stroke death rates are 84 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 9 (2 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253751

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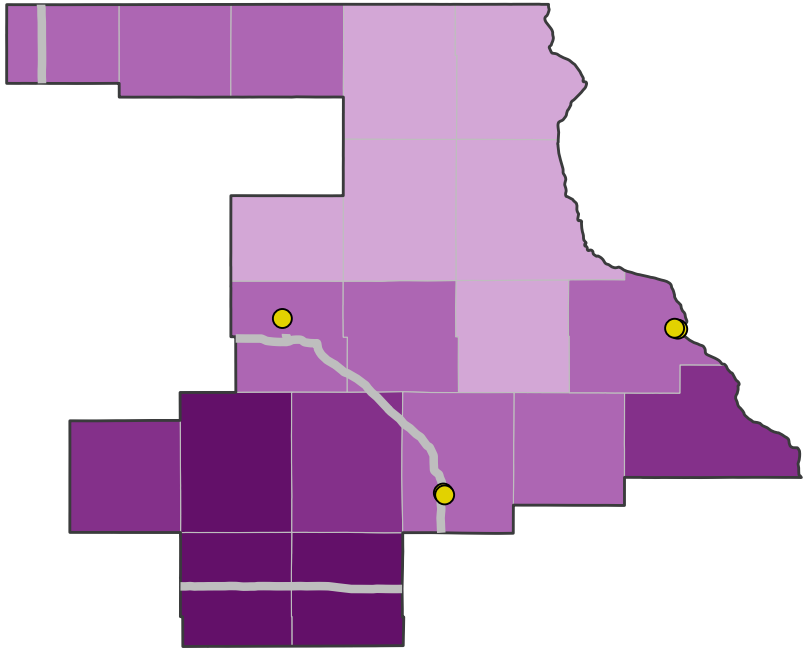
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 55
- 55 − 60
- 60 − 65
- 65 − 71
- 71 − 83

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

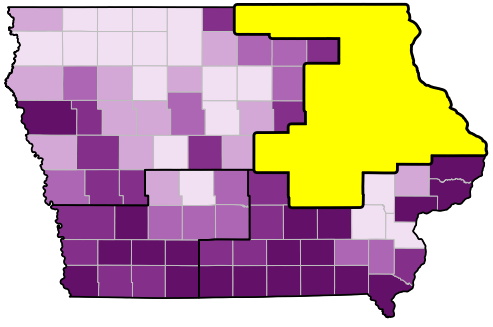
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Iowa

63 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Iowa Congressional District 1

The map for Congressional District 1 in Iowa shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 79 per 100,000. For Iowa and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026
https://doi.org/10.15620/cdc/253752

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 55
- 55 − 60
- 60 − 65
- 65 − 71
- 71 − 83

- County*
- Highway

Stroke Centers

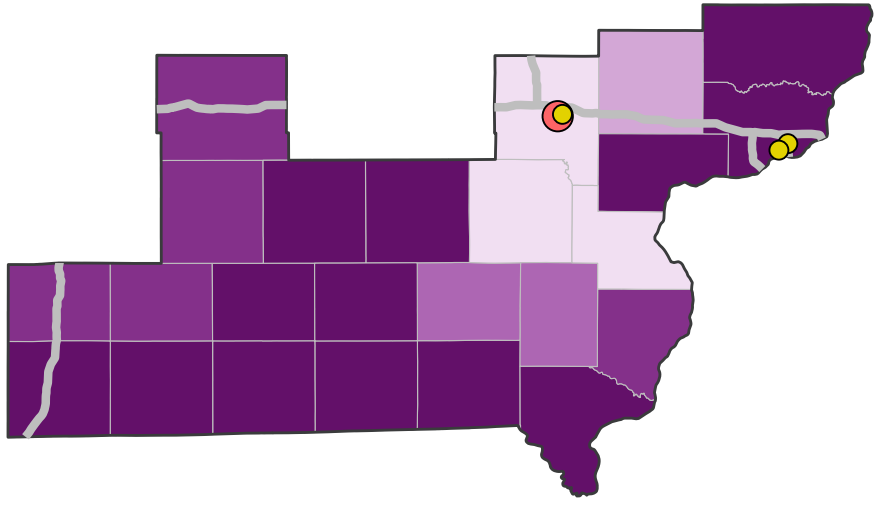
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

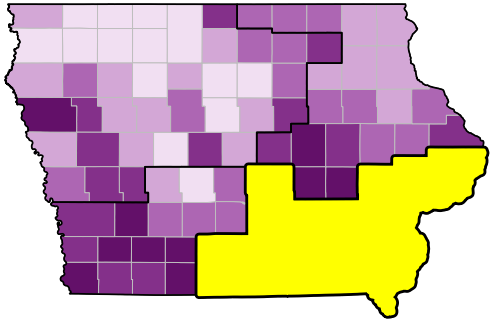
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Iowa

63 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Iowa Congressional District 2

The map for Congressional District 2 in Iowa shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 36 − 83 per 100,000. For Iowa and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253753

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 55
- 55 − 60
- 60 − 65
- 65 − 71
- 71 − 83

- County*
- Highway

Stroke Centers

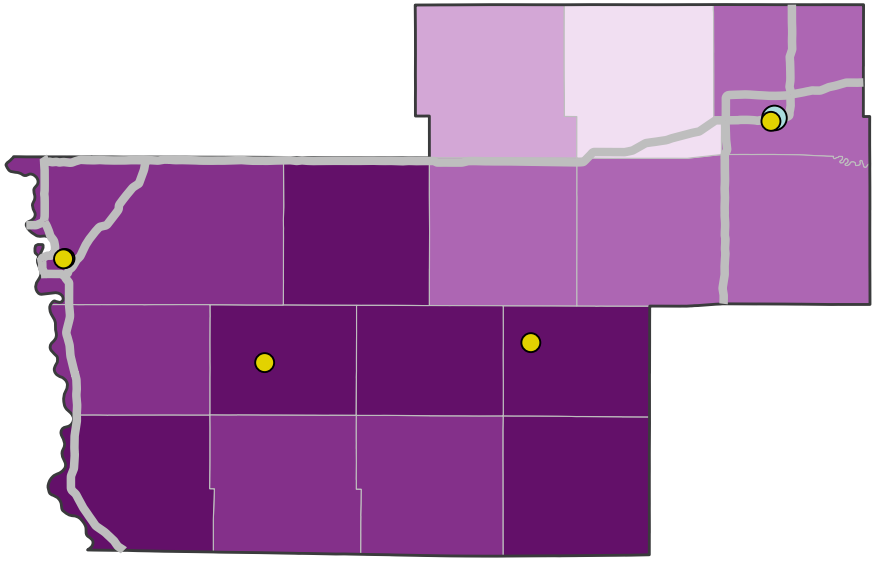
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

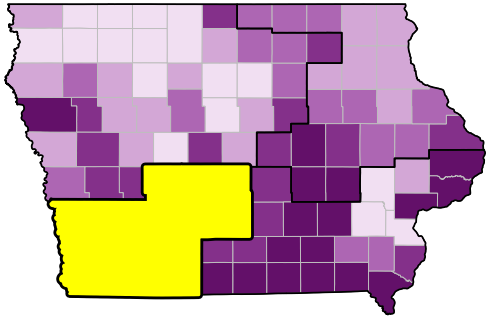
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Iowa

63 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Iowa Congressional District 3

The map for Congressional District 3 in Iowa shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 53 − 80 per 100,000. For Iowa and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (5 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253754

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 55
- 55 − 60
- 60 − 65
- 65 − 71
- 71 − 83

- County*
- Highway

Stroke Centers

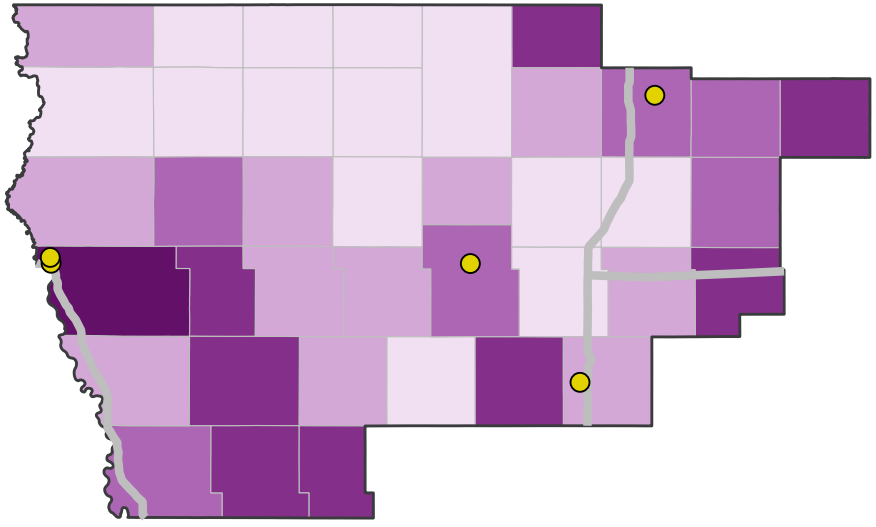
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

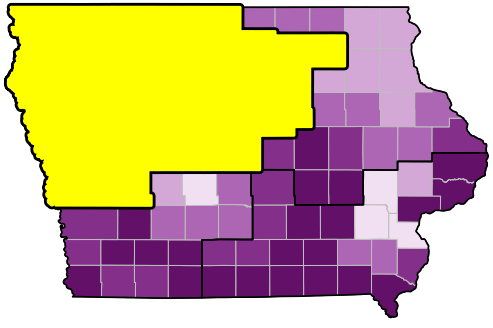
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Iowa

63 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Iowa Congressional District 4

The map for Congressional District 4 in Iowa shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 45 − 71 per 100,000. For Iowa and the United States, stroke death rates are 63 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253755

KANSAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

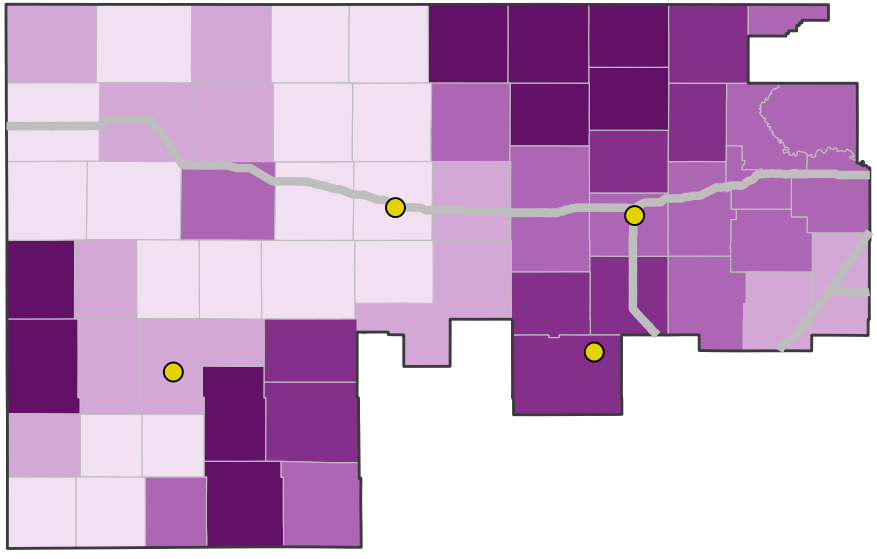
- 42 − 61
- 61 − 68
- 68 − 72
- 72 − 80
- 80 − 165

- County*
- Highway

Stroke Centers

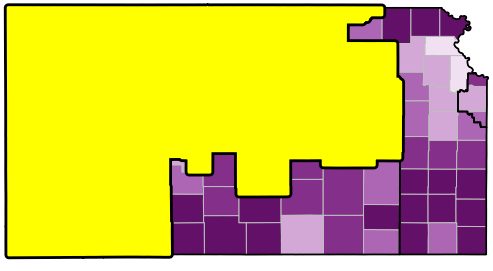
Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Kansas

73 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kansas Congressional District 1

The map for Congressional District 1 in Kansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 146 per 100,000. For Kansas and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253756

KANSAS

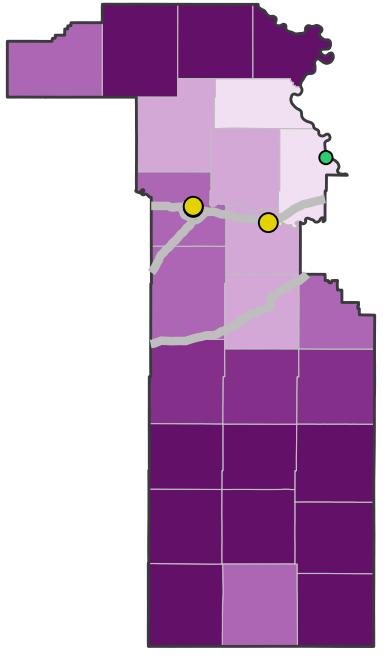
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 61
- 61 − 68
- 68 − 72
- 72 − 80
- 80 − 165

- County*
- Highway

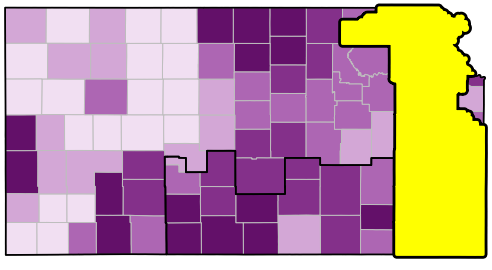
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kansas

73 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kansas Congressional District 2

The map for Congressional District 2 in Kansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 126 per 100,000. For Kansas and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (1 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253757

KANSAS

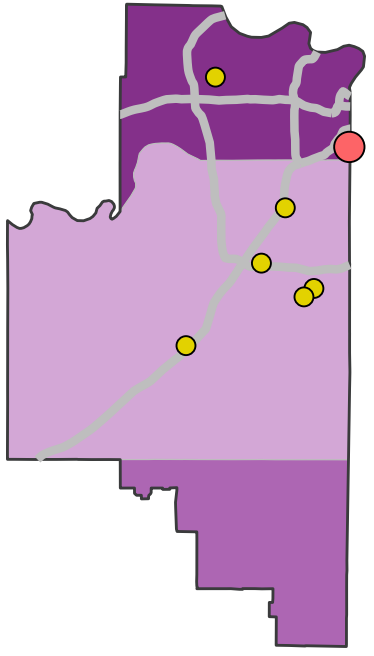
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 61
- 61 − 68
- 68 − 72
- 72 − 80
- 80 − 165

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

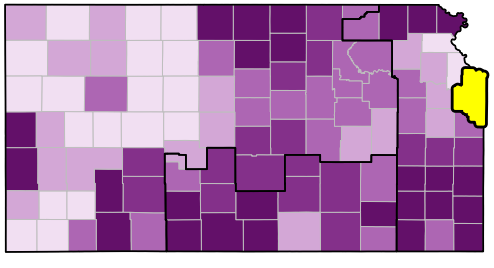
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kansas

73 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kansas Congressional District 3

The map for Congressional District 3 in Kansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 78 per 100,000. For Kansas and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 3 (6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253758

KANSAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 61
- 61 − 68
- 68 − 72
- 72 − 80
- 80 − 165

- County*
- Highway

Stroke Centers

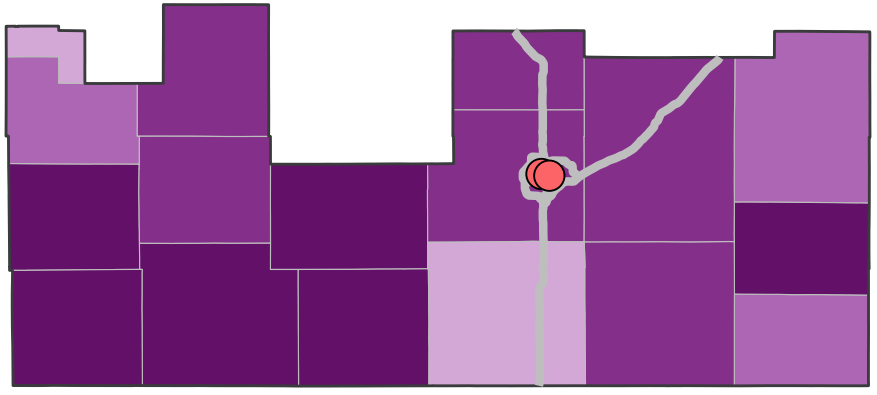
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

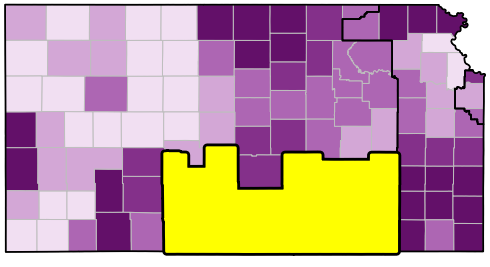
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Kansas

73 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KANSAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kansas Congressional District 4

The map for Congressional District 4 in Kansas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 165 per 100,000. For Kansas and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 4 (2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253759

KENTUCKY

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137

County*
Highway

Stroke Centers

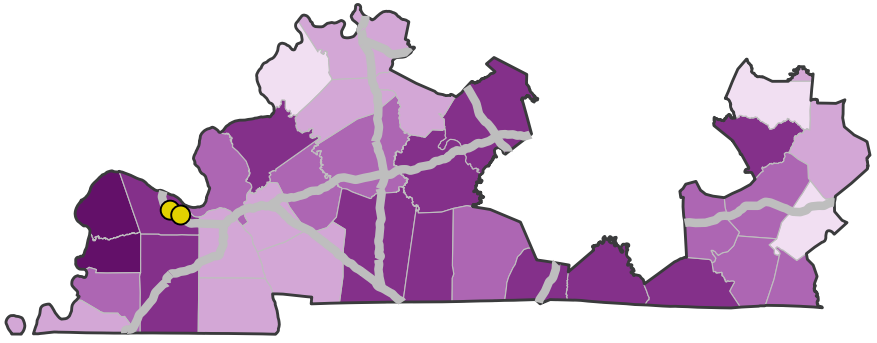
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

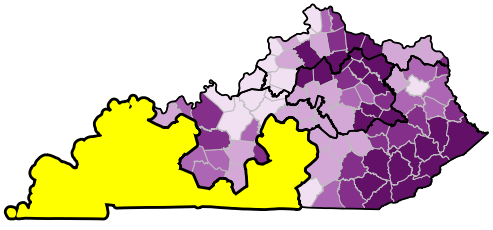
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KENTUCKY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 1

The map for Congressional District 1 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 102 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 1 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253760

KENTUCKY

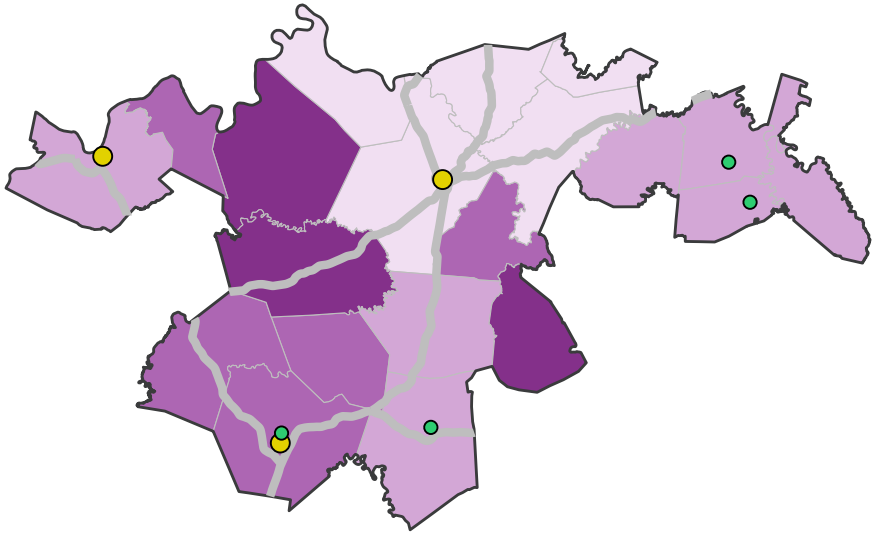
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137
- County*
- Highway

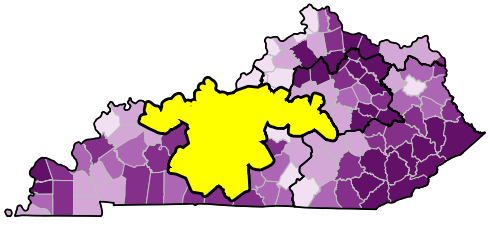
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KENTUCKY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 2

The map for Congressional District 2 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 95 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 2 (4 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253761

KENTUCKY

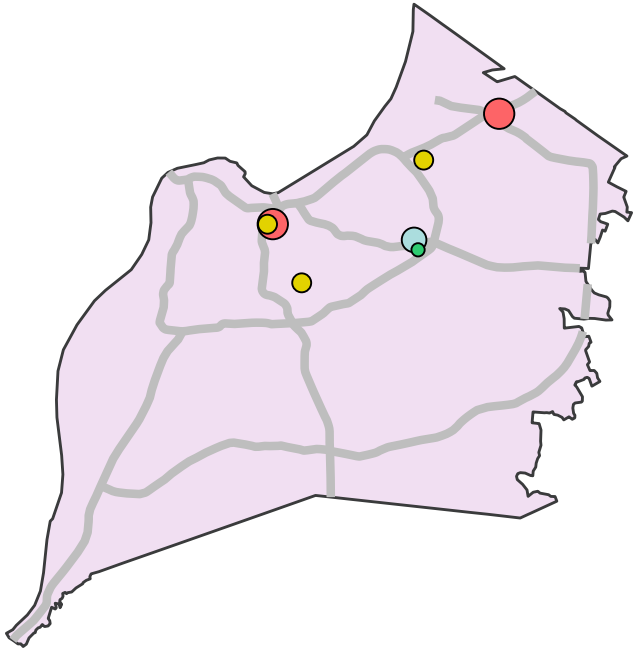
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137

- County*
- Highway

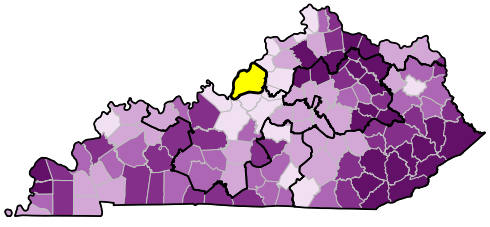
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 3

The map for Congressional District 3 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for Jefferson County, the single county represented in the district, is 68 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 3 (1 Acute, 3 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253762

KENTUCKY

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137

- County*
- Highway

Stroke Centers

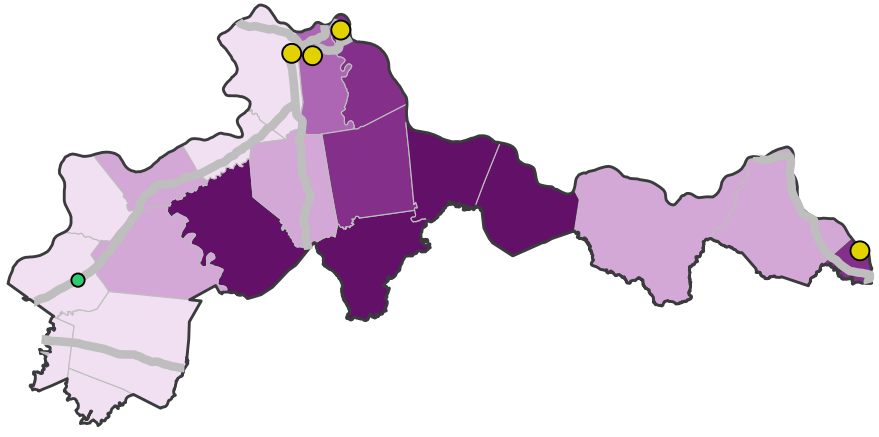
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

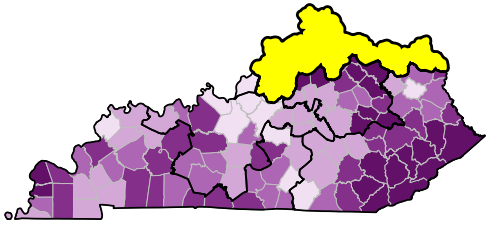
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KENTUCKY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 4

The map for Congressional District 4 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 61 − 131 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253763

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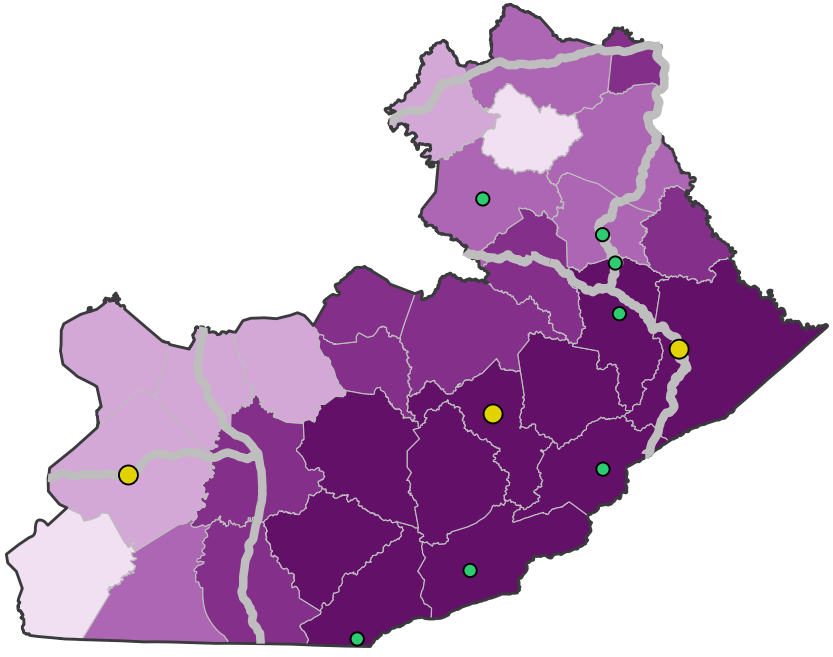
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 5



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137

- County*
- Highway

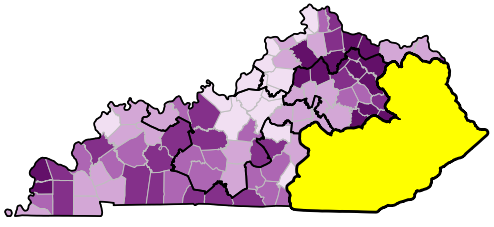
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KENTUCKY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 5

The map for Congressional District 5 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 132 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 5 (7 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253764

KENTUCKY

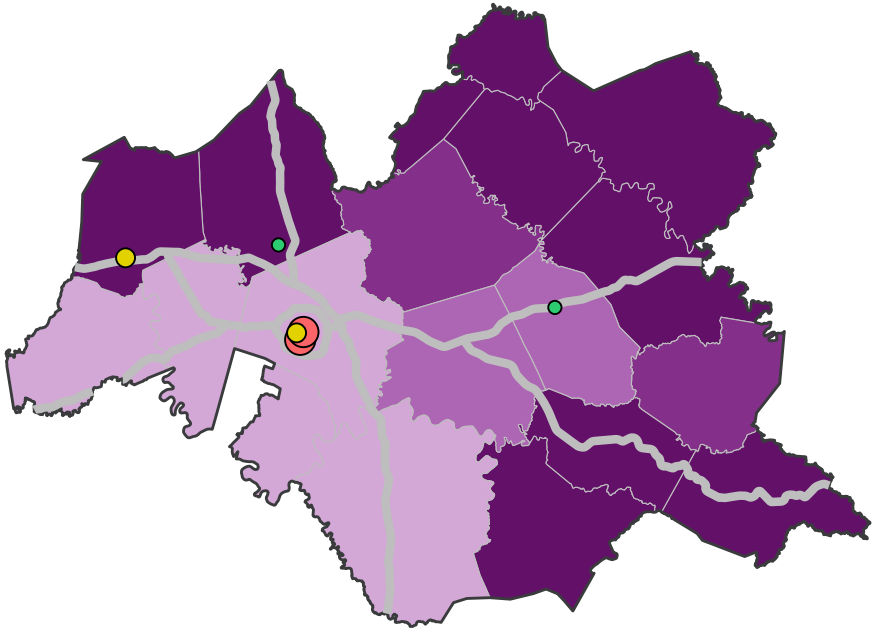
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 61 − 78
- 78 − 86
- 86 − 92
- 92 − 100
- 100 − 137

- County*
- Highway

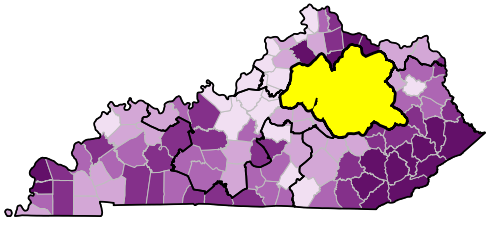
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Kentucky

90 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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KENTUCKY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Kentucky Congressional District 6

The map for Congressional District 6 in Kentucky shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 137 per 100,000. For Kentucky and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (2 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253765

LOUISIANA

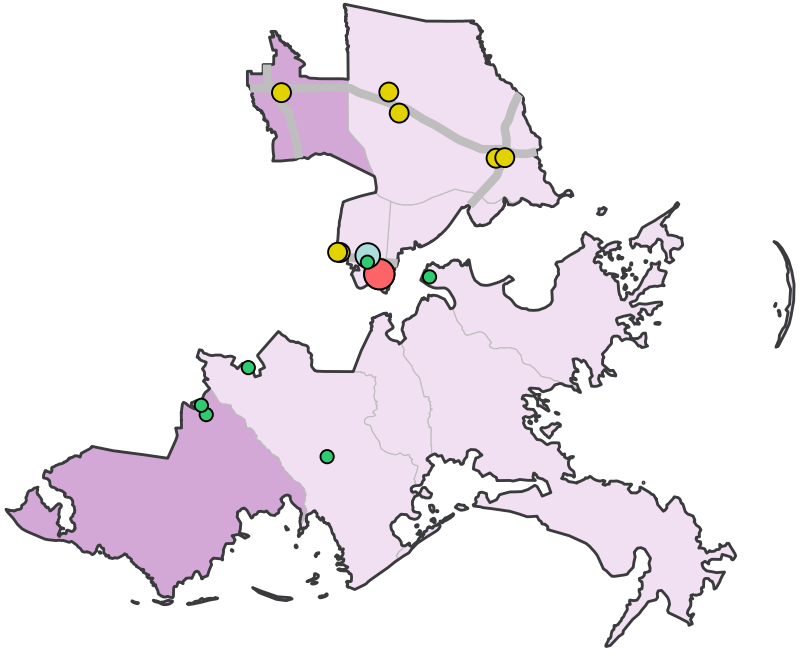
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

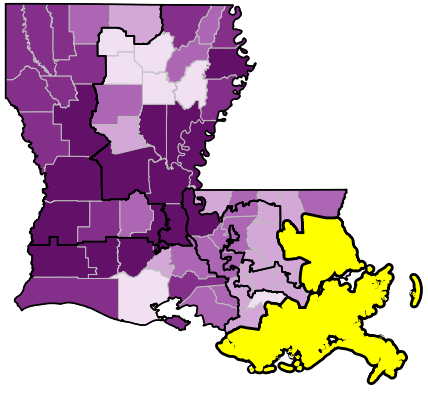
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 1

The map for Congressional District 1 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 87 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 16 stroke centers in District 1 (6 Acute, 7 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253766

LOUISIANA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

County*
Highway

Stroke Centers

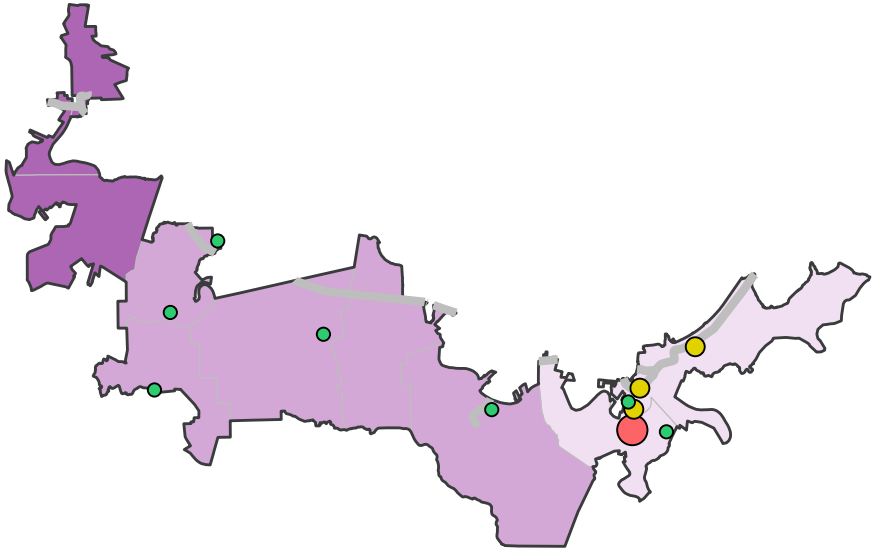
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

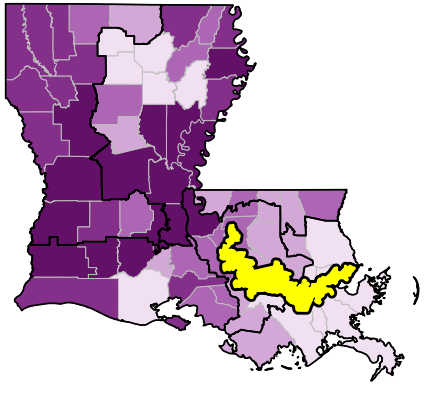
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 2

The map for Congressional District 2 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 105 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 11 stroke centers in District 2 (7 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253767

LOUISIANA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

- County*
- Highway

Stroke Centers

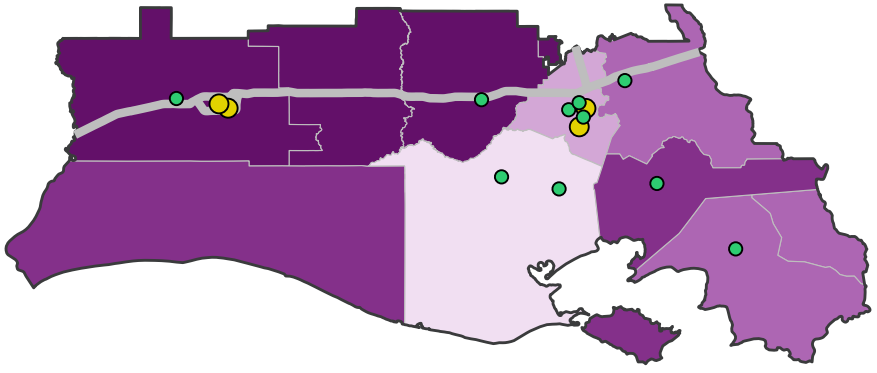
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

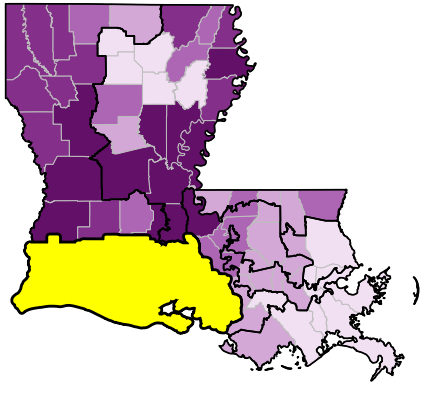
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 3

The map for Congressional District 3 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 165 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 14 stroke centers in District 3 (10 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253768

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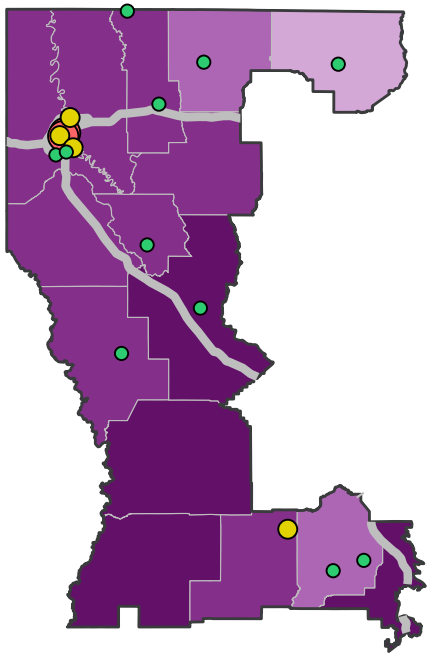
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

- County*
- Highway

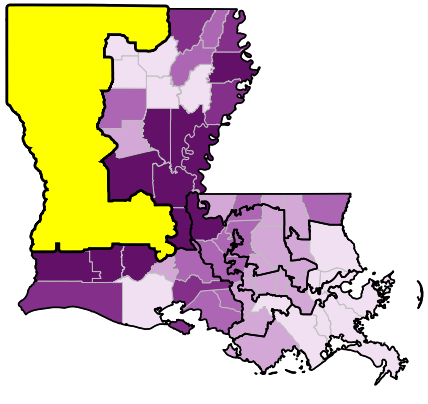
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 4

The map for Congressional District 4 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 84 − 137 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 17 stroke centers in District 4 (11 Acute, 4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253769

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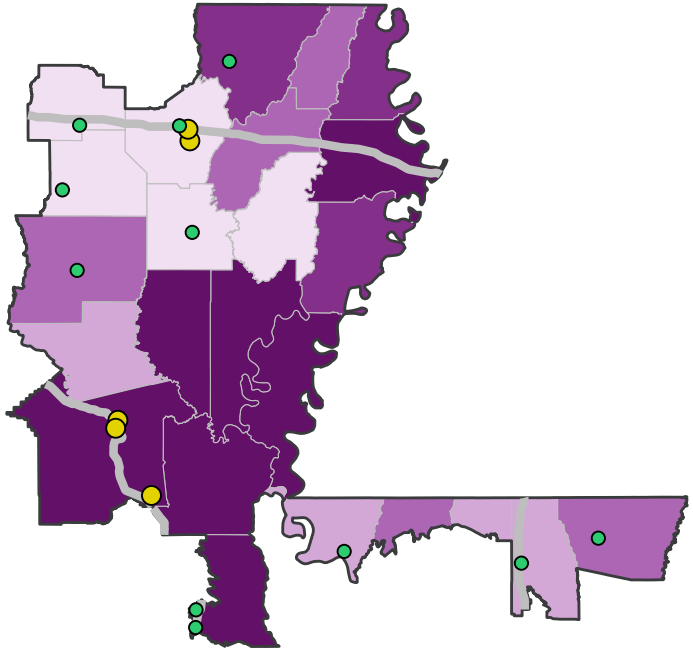
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

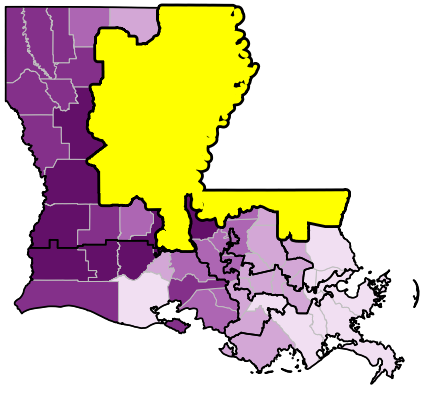
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 5

The map for Congressional District 5 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 74 − 126 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 16 stroke centers in District 5 (11 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253770

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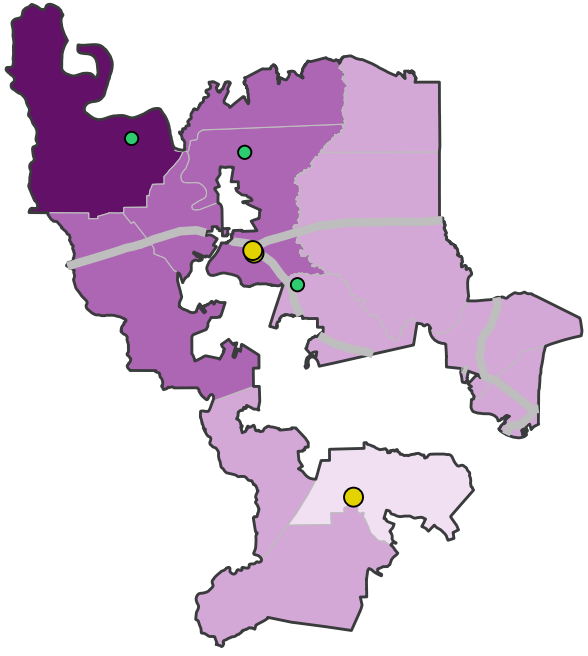
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 73 − 84
- 84 − 96
- 96 − 106
- 106 − 113
- 113 − 165

- County*
- Highway

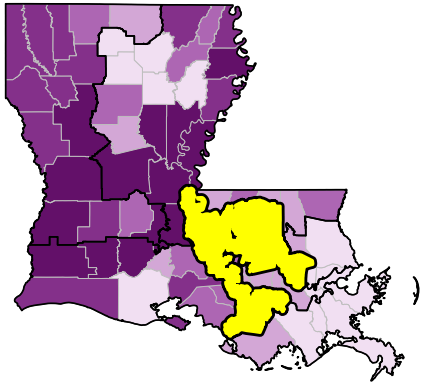
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Louisiana

101 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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LOUISIANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Louisiana Congressional District 6

The map for Congressional District 6 in Louisiana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 117 per 100,000. For Louisiana and the United States, stroke death rates are 101 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (3 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253771

MAINE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 56
- 56 − 57
- 57 − 64
- 64 − 66
- 66 − 70

County*
Highway

Stroke Centers

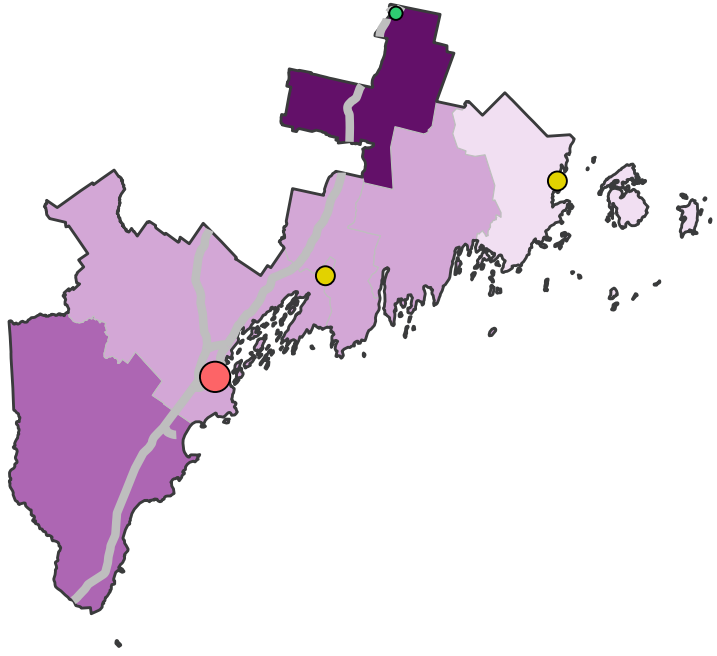
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

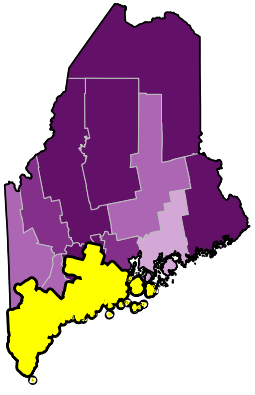
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Maine

61 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MAINE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maine Congressional District 1

The map for Congressional District 1 in Maine shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 66 per 100,000. For Maine and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (1 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253772

MAINE

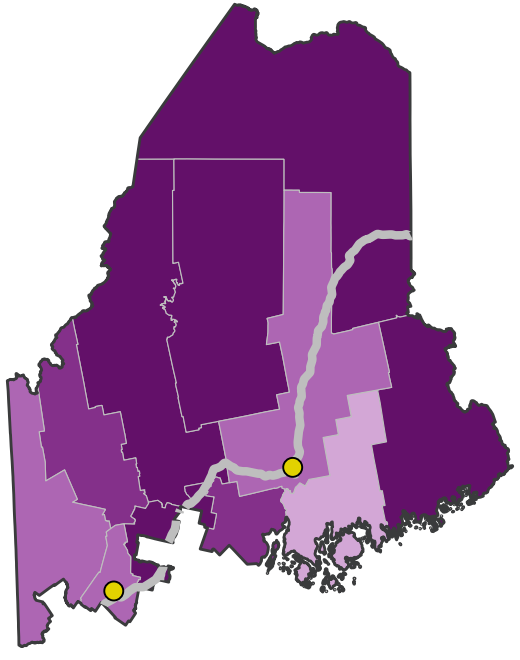
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 56
- 56 − 57
- 57 − 64
- 64 − 66
- 66 − 70

- County*
- Highway

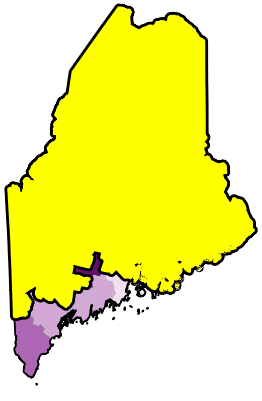
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maine

61 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MAINE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maine Congressional District 2

The map for Congressional District 2 in Maine shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 70 per 100,000. For Maine and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 2 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253773

MARYLAND

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

Stroke Centers

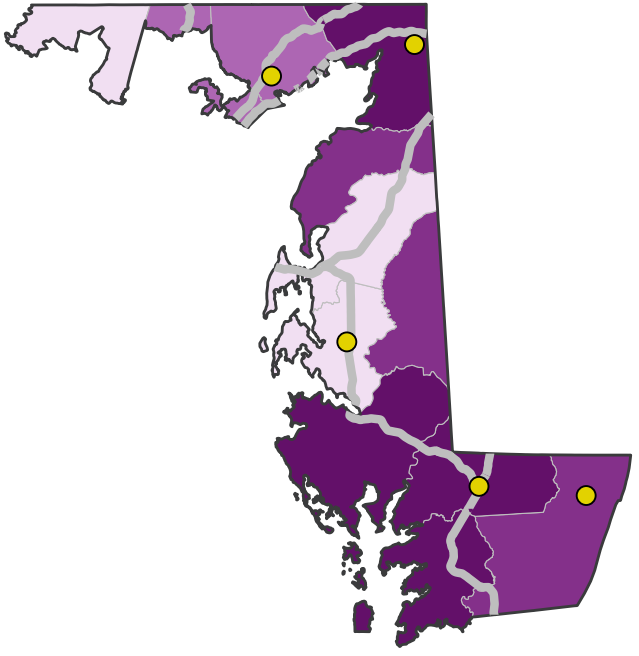
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

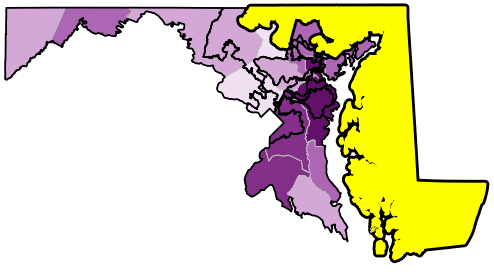
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 1

The map for Congressional District 1 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 53 − 146 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253774

MARYLAND

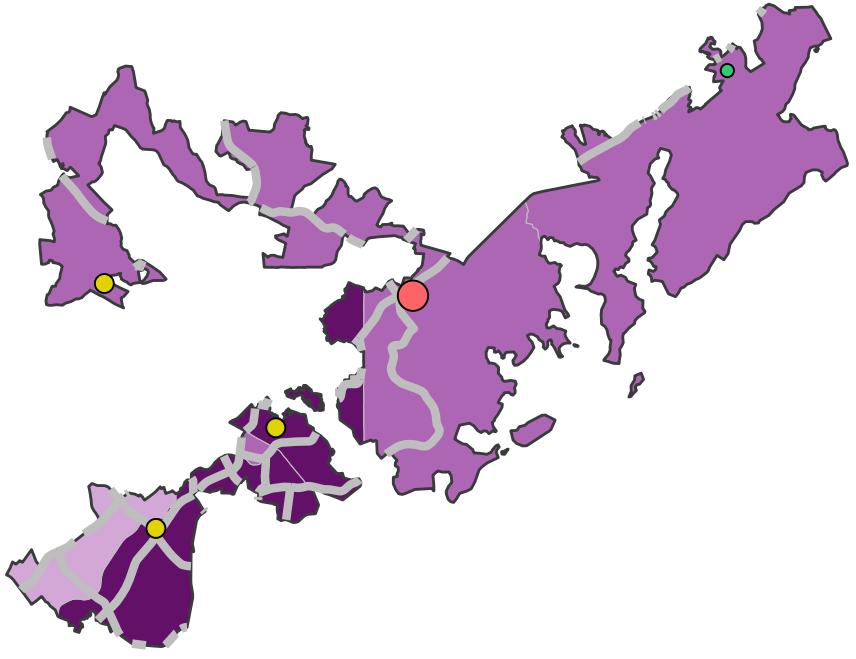
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

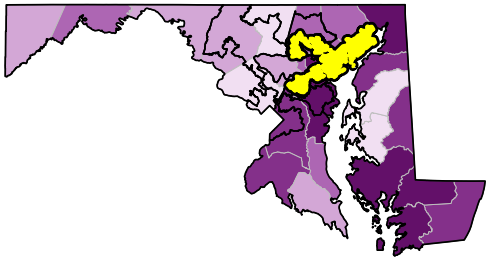
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 2

The map for Congressional District 2 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 117 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (1 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253775

MARYLAND

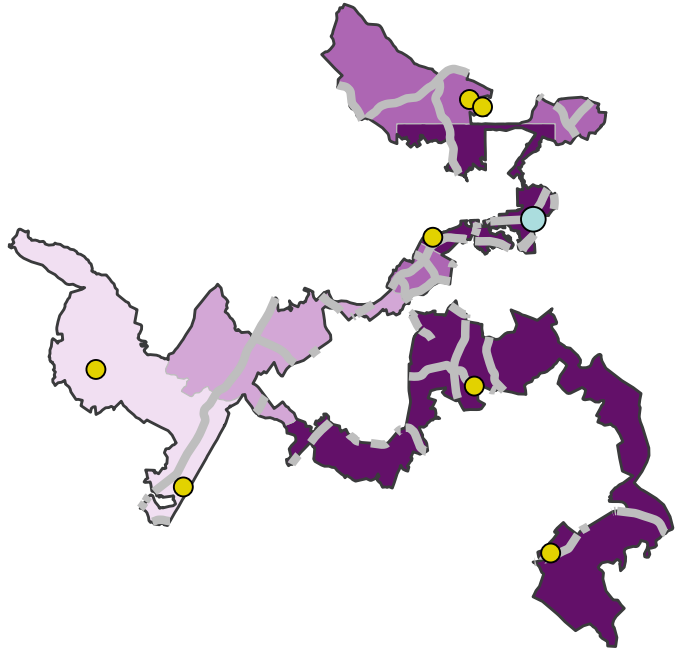
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

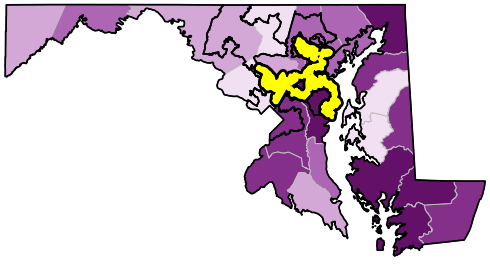
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 3

The map for Congressional District 3 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 117 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 3 (7 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253776

MARYLAND

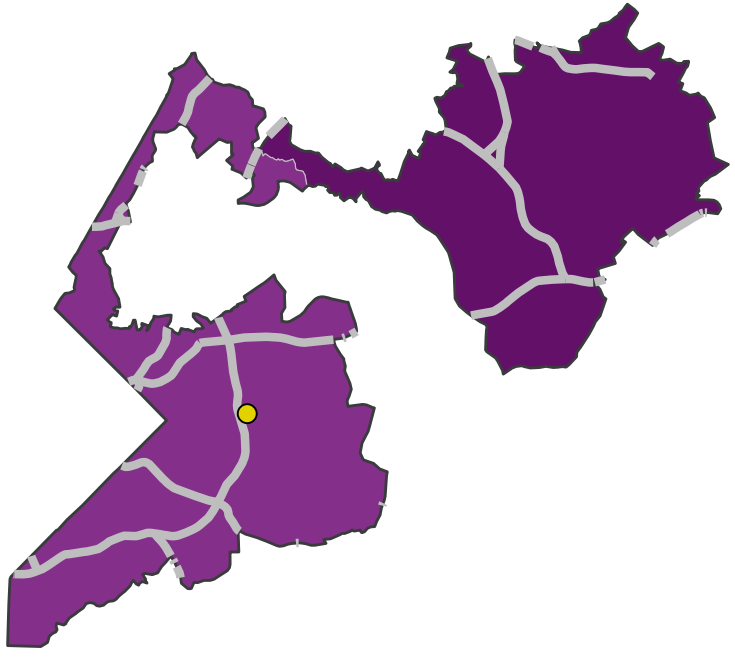
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

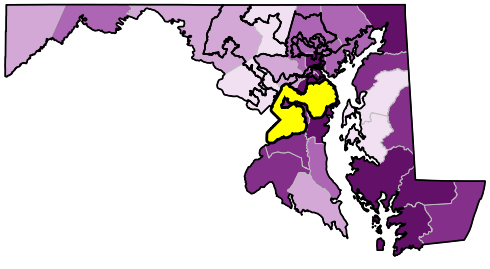
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 4

The map for Congressional District 4 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 95 − 112 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There is only 1 stroke center in District 4 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253777

MARYLAND

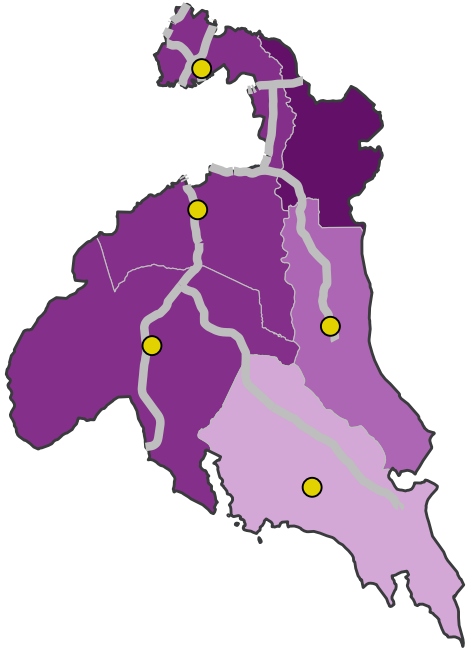
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

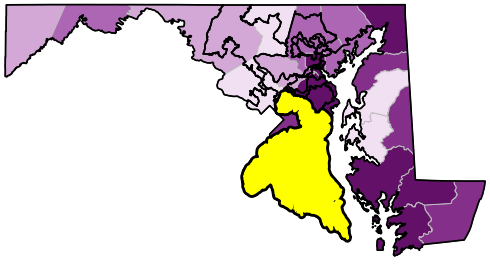
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 5

The map for Congressional District 5 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 112 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253778

MARYLAND

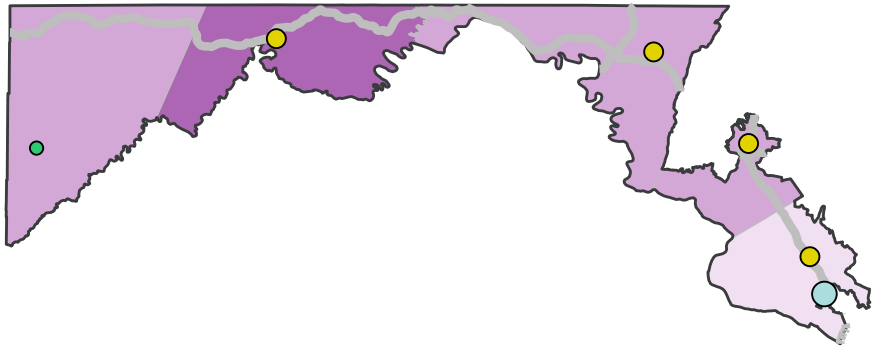
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

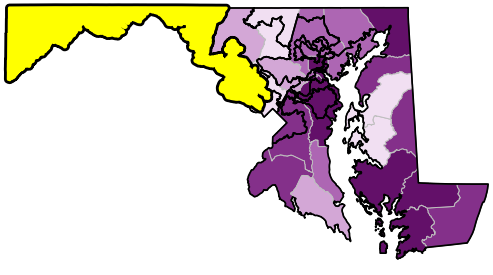
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 6

The map for Congressional District 6 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 79 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (1 Acute, 4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253779

MARYLAND

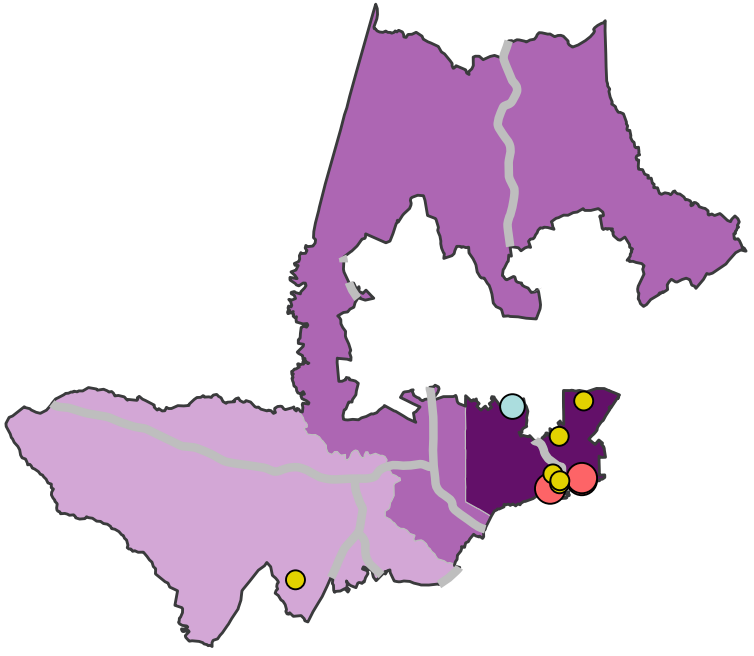
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

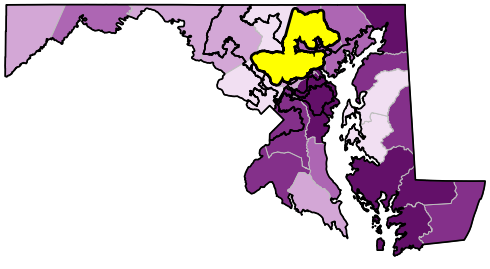
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 7

The map for Congressional District 7 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 117 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 7 (6 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253780

MARYLAND

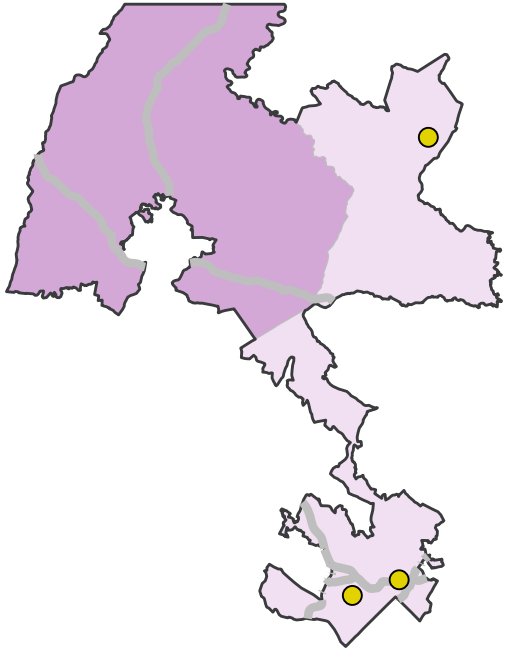
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 53 − 67
- 67 − 79
- 79 − 95
- 95 − 112
- 112 − 146

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

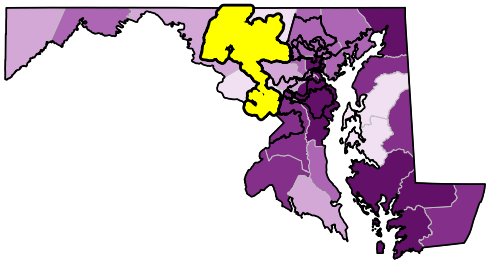
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Maryland

91 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MARYLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Maryland Congressional District 8

The map for Congressional District 8 in Maryland shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 76 per 100,000. For Maryland and the United States, stroke death rates are 91 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 8 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253781

MASSACHUSETTS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

Stroke Centers

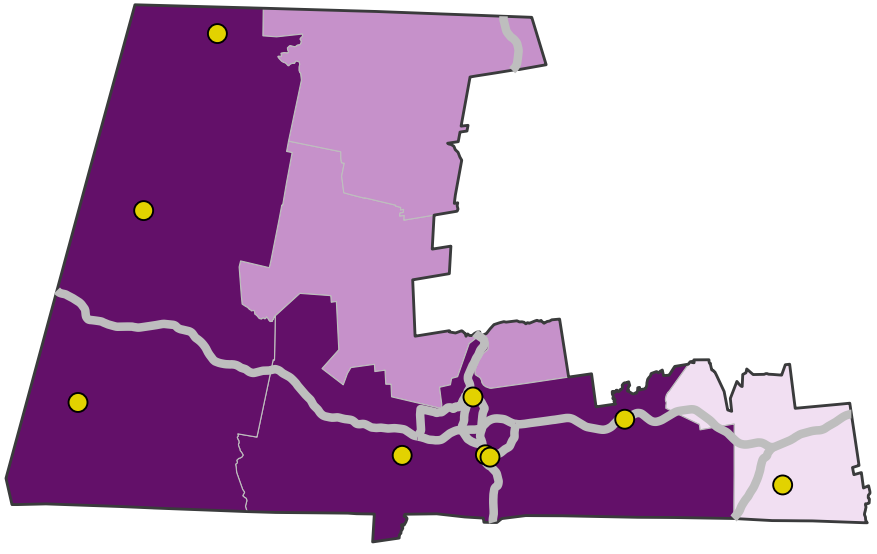
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

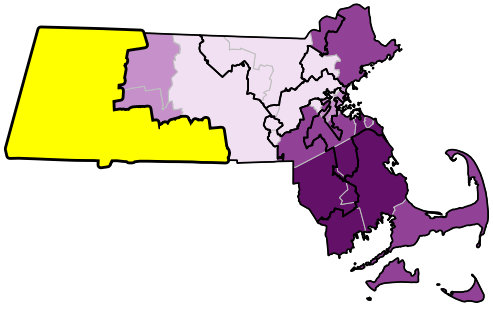
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MASSACHUSETTS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 1

The map for Congressional District 1 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 45 − 62 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 1 (9 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253782

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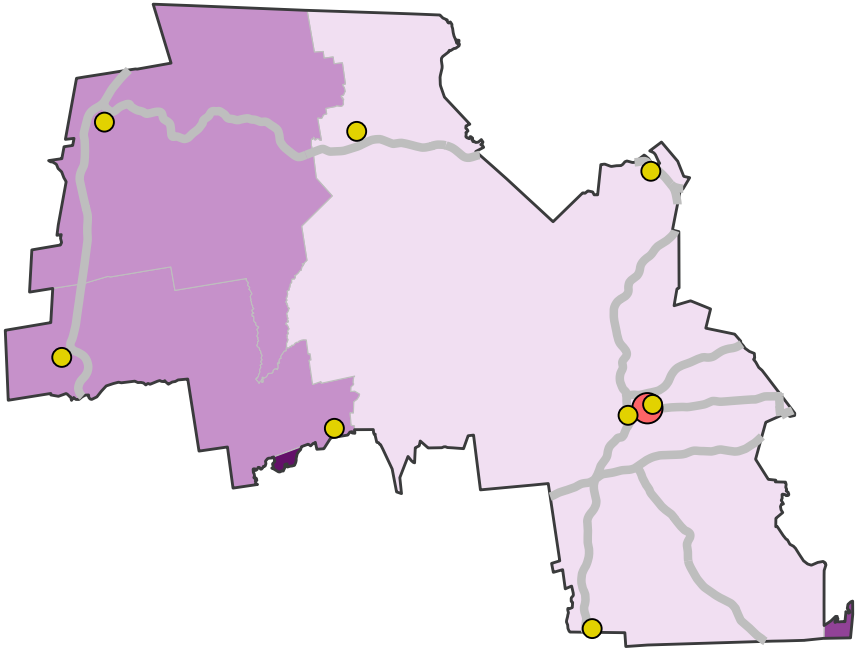
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

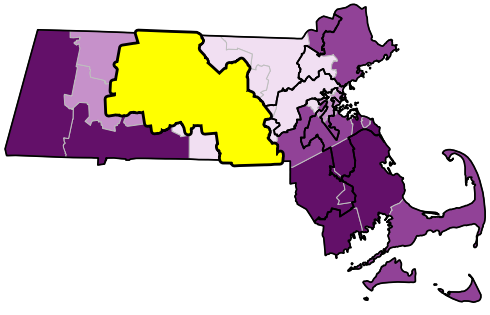
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 2

The map for Congressional District 2 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 45 − 62 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 2 (8 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253783

MASSACHUSETTS

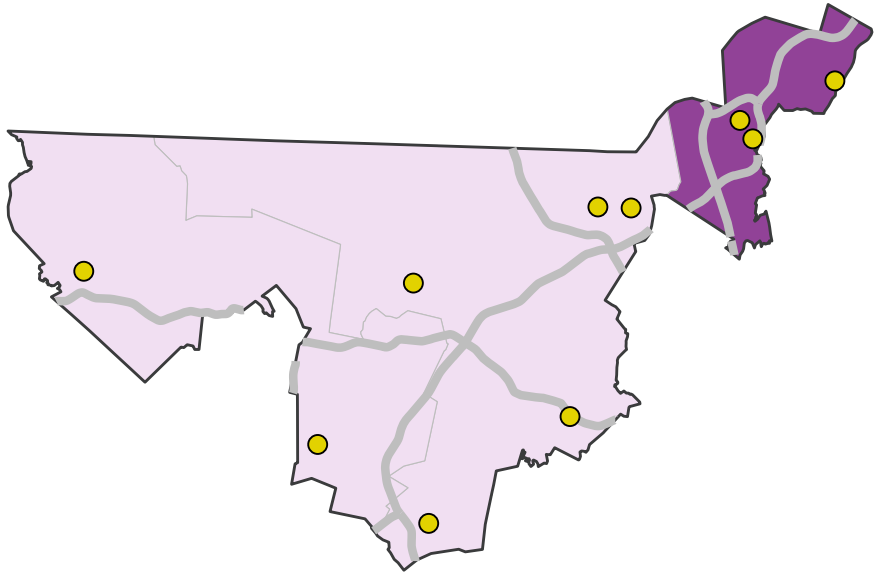
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

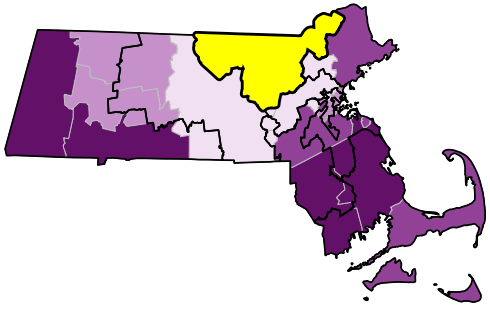
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 3

The map for Congressional District 3 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 52 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 3 (10 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253784

MASSACHUSETTS

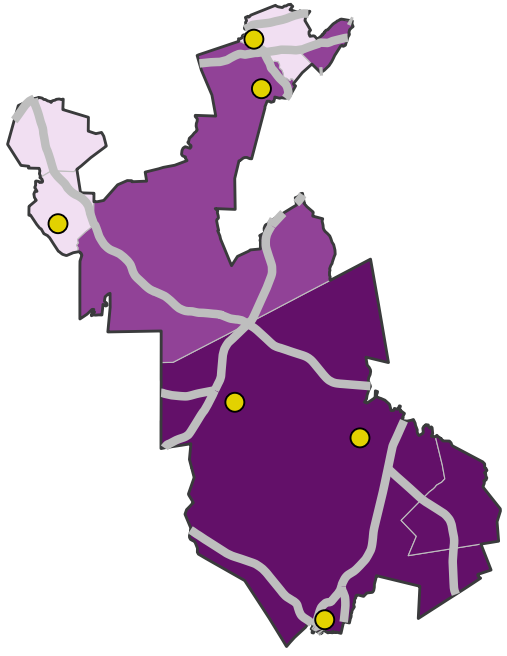
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 4



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

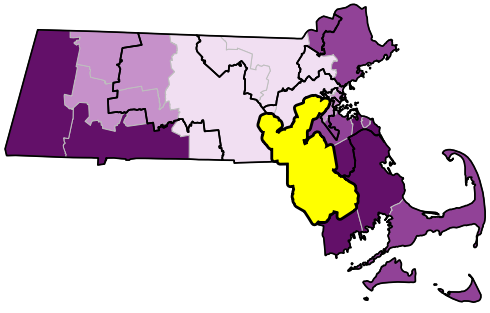
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 4

The map for Congressional District 4 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 54 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 4 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253785

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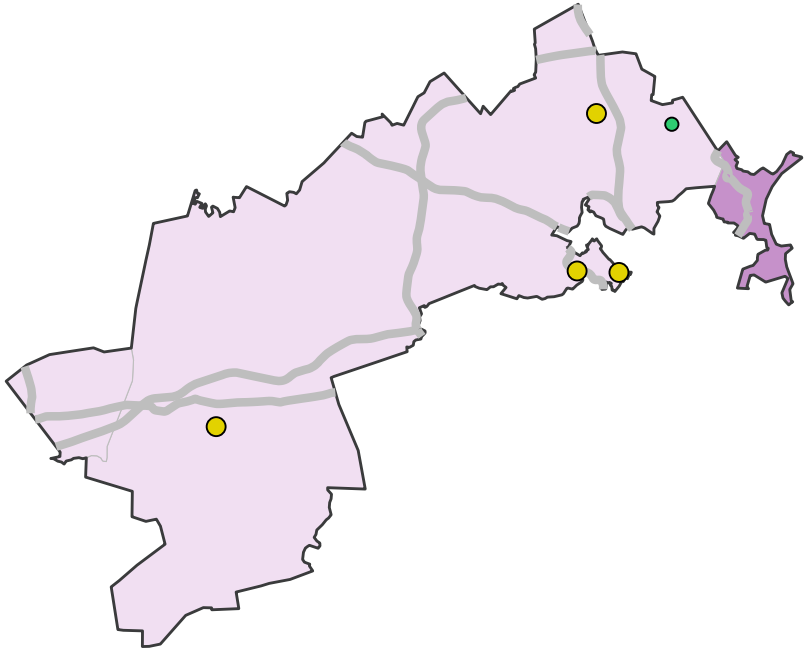
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

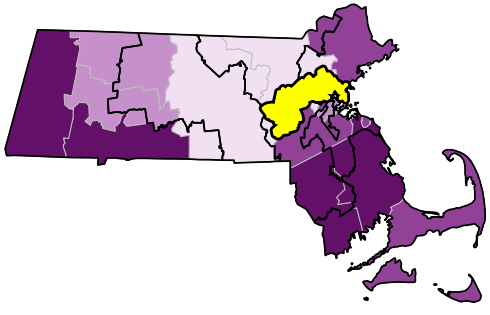
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 5

The map for Congressional District 5 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 50 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253786

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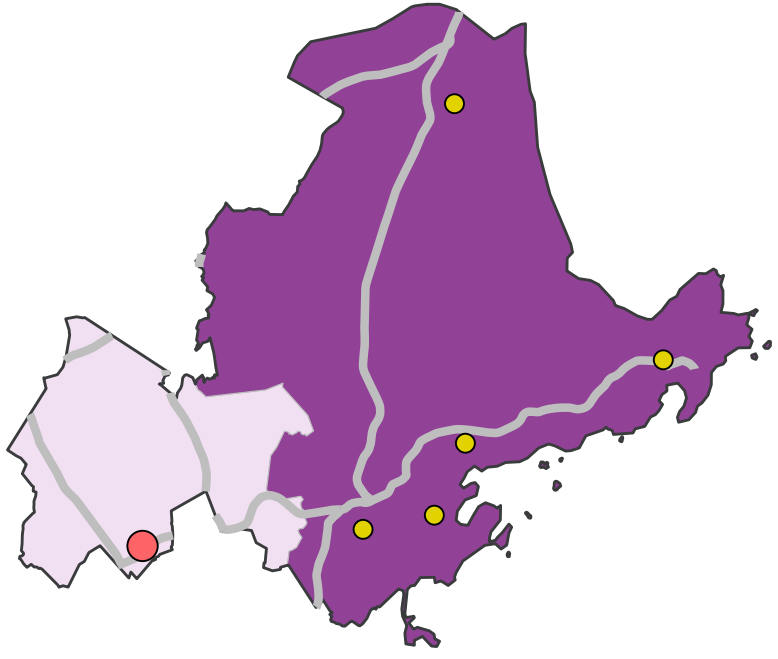
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

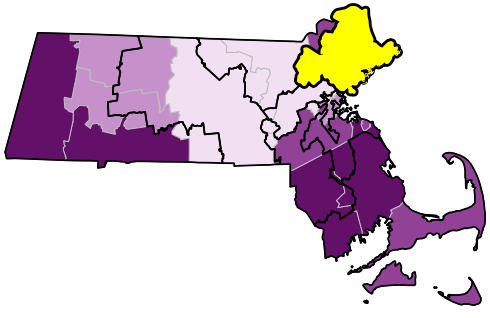
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 6

The map for Congressional District 6 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 52 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253787

MASSACHUSETTS

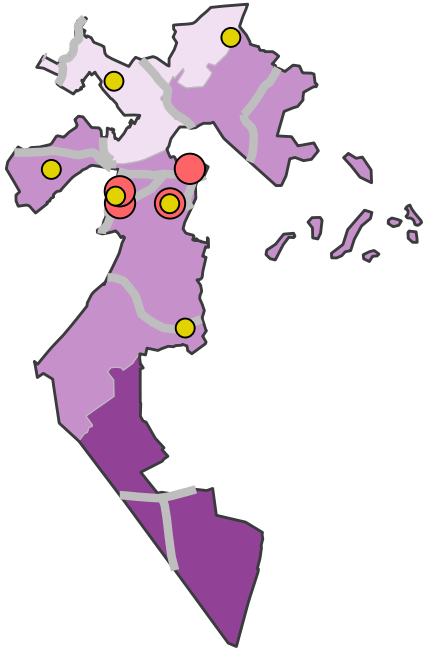
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

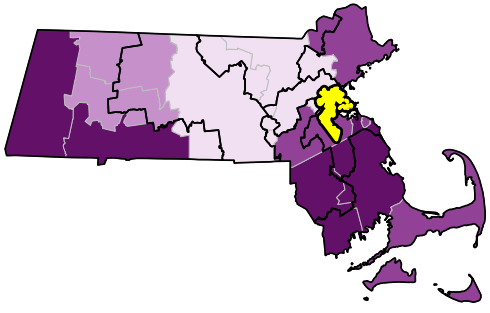
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 7

The map for Congressional District 7 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 51 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 7 (6 Primary, 4 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253788

MASSACHUSETTS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 8



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

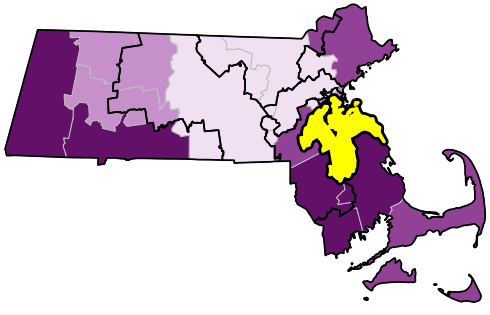
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 8

The map for Congressional District 8 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 50 − 54 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 8 (6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253789

MASSACHUSETTS

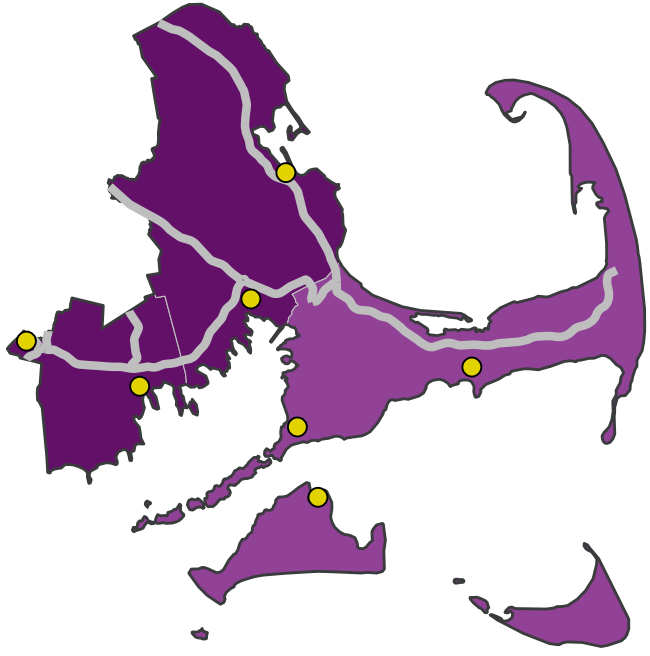
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 42 − 50
- 50 − 51
- 51 − 53
- 53 − 62

- County*
- Highway

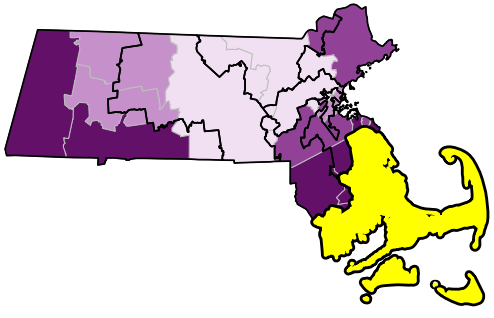
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Massachusetts

51 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Massachusetts Congressional District 9

The map for Congressional District 9 in Massachusetts shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 51 − 54 per 100,000. For Massachusetts and the United States, stroke death rates are 51 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 9 (7 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253790

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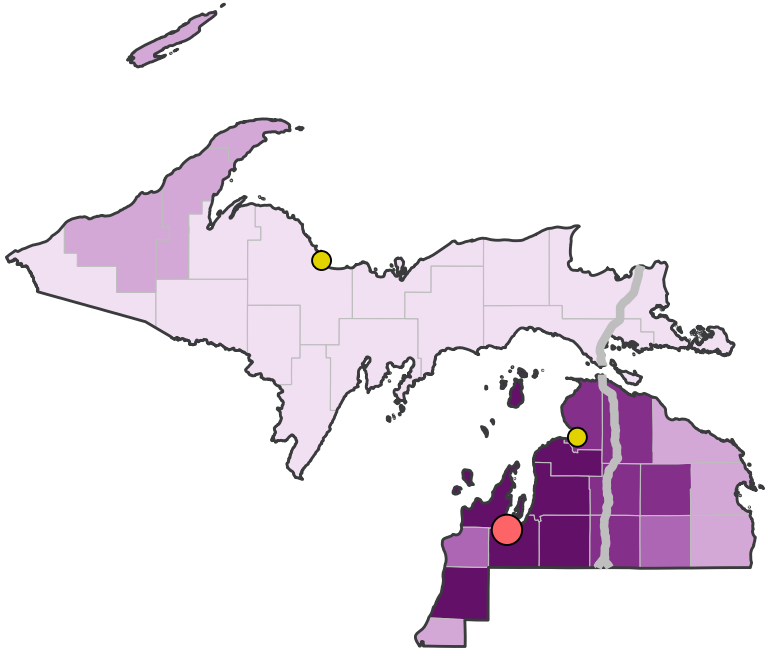
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

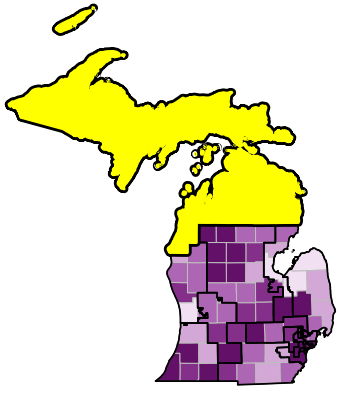
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 1

The map for Congressional District 1 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 127 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253791

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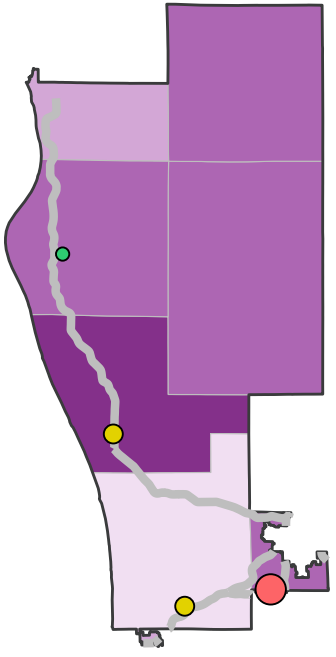
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

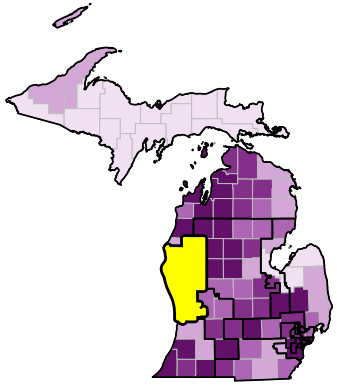
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 2

The map for Congressional District 2 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 89 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (1 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253792

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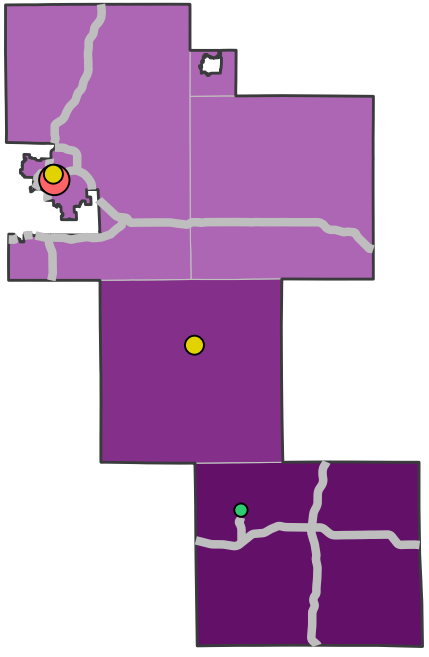
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 3



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

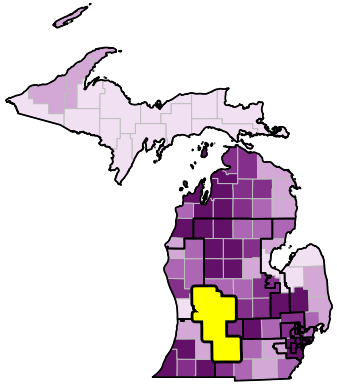
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 3

The map for Congressional District 3 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 84 − 95 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (1 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253793

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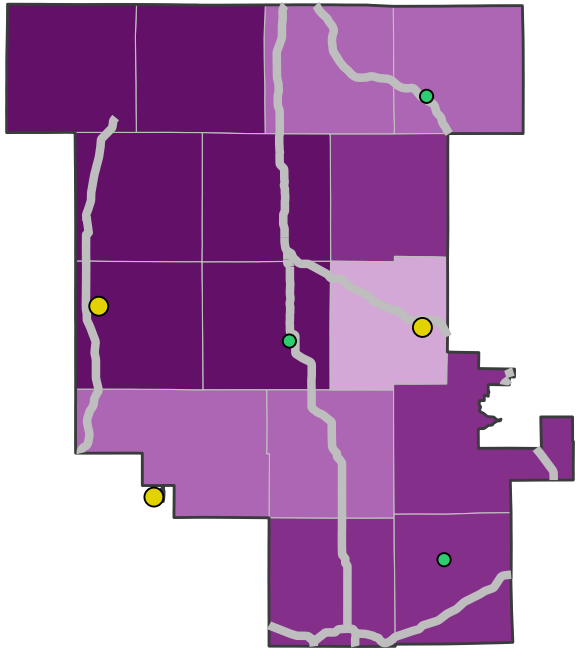
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

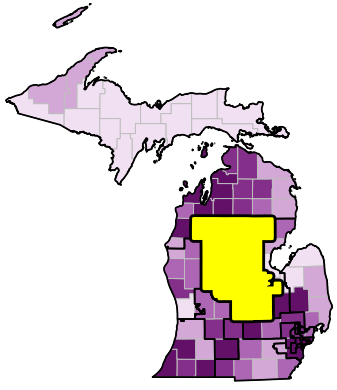
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 4

The map for Congressional District 4 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 74 − 132 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 4 (3 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253794

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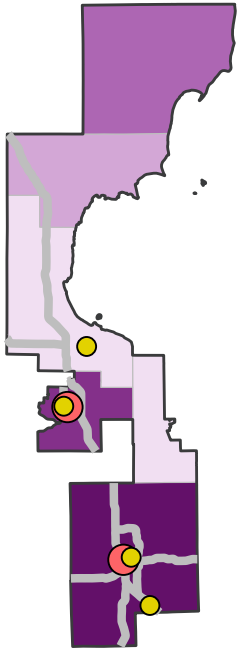
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

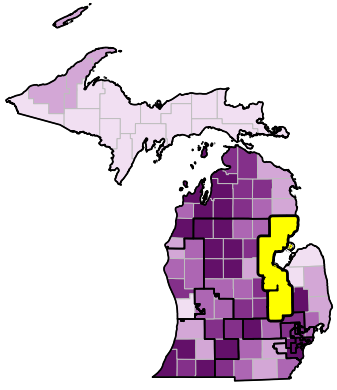
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 5

The map for Congressional District 5 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 95 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 5 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253795

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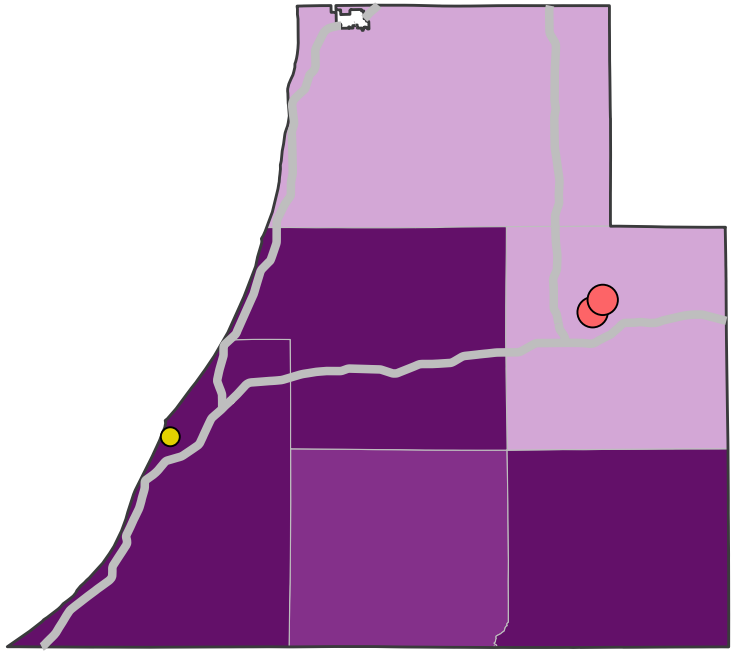
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

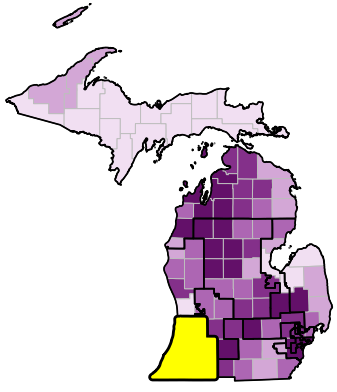
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 6

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 6

The map for Congressional District 6 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 119 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 6 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253796

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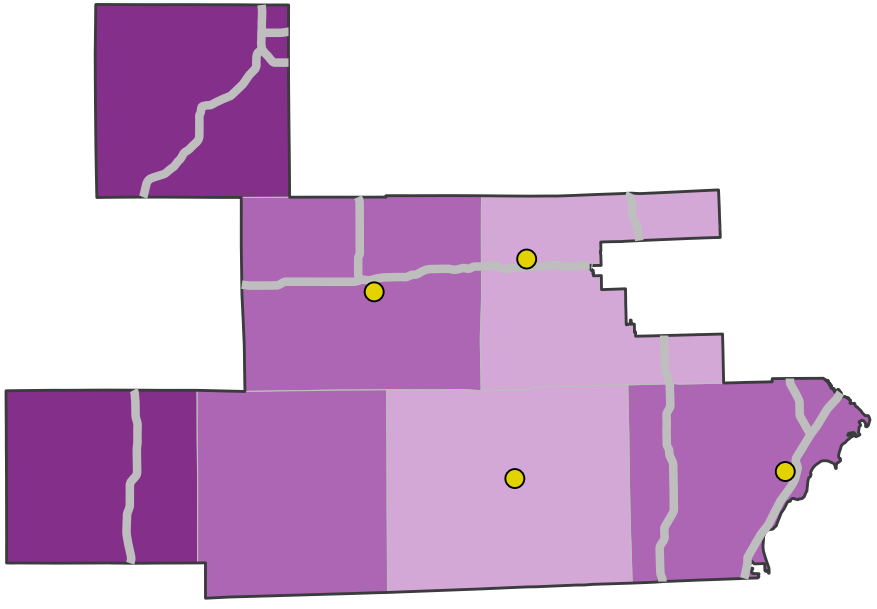
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 7



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

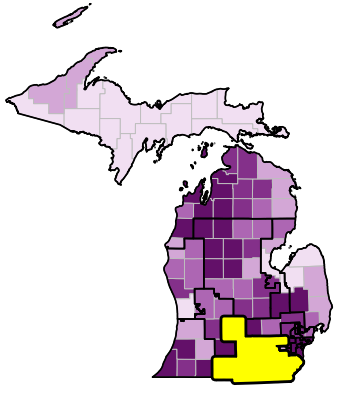
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 7

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 7

The map for Congressional District 7 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 93 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 7 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253797

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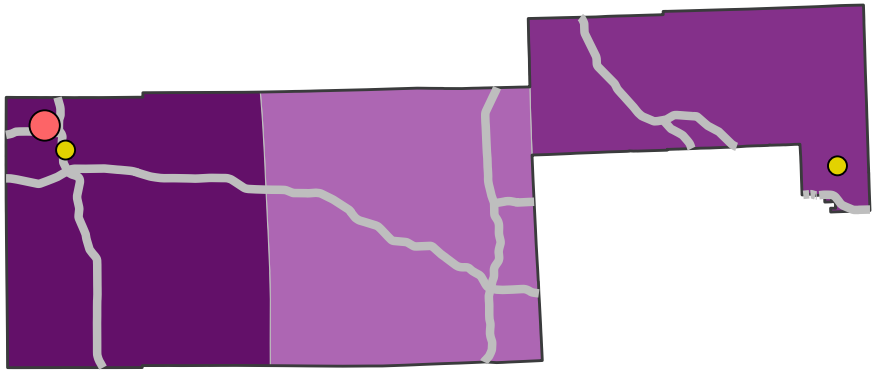
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

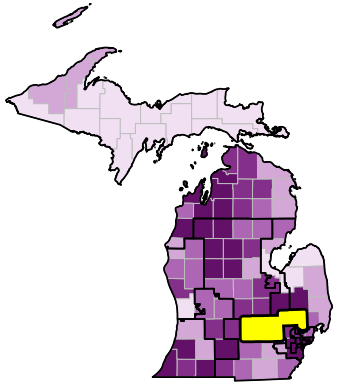
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 8

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 8

The map for Congressional District 8 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 96 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 8 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253798

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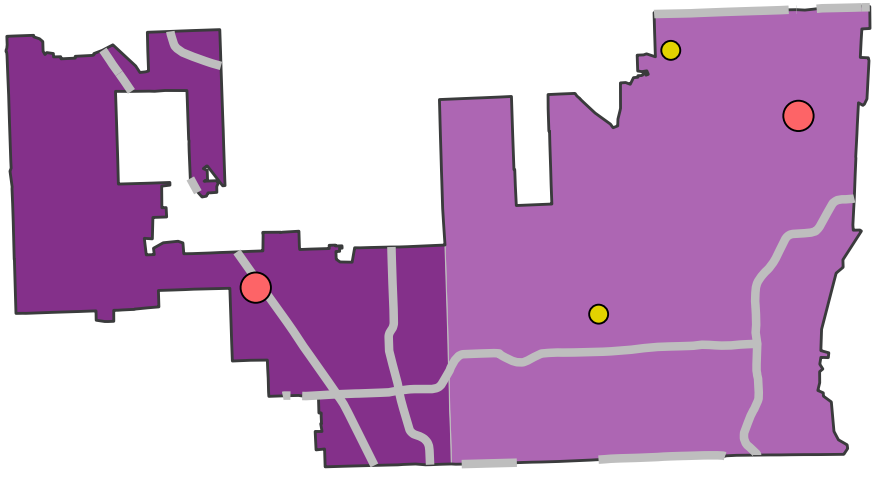
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

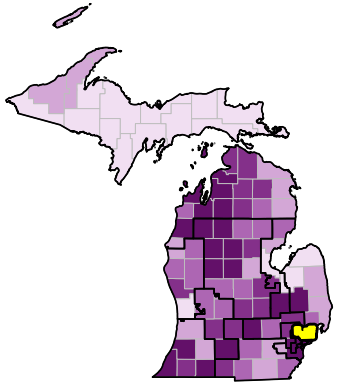
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 9

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

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What is a Comprehensive Stroke Center (CSC)?

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 9

The map for Congressional District 9 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 87 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 9 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253799

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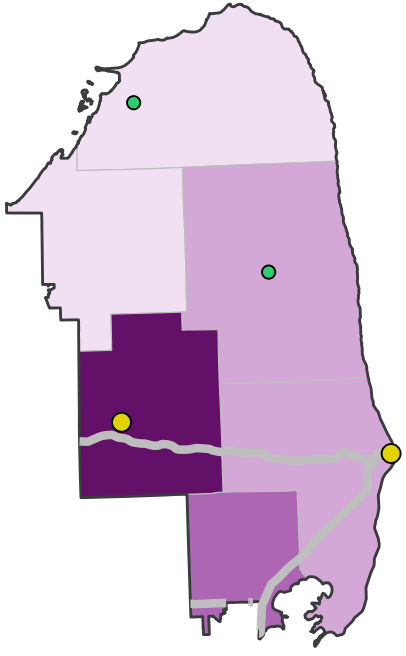
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

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This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 10



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

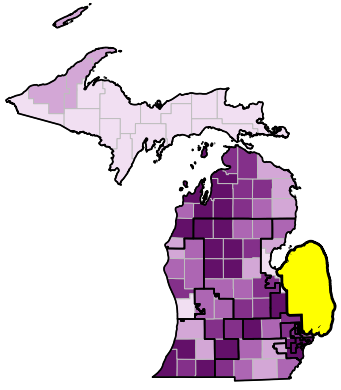
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
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  PSC + Designated ICU Beds, Mechanical Thrombectomy
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  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 10

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 10

The map for Congressional District 10 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 97 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 10 (2 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253800

MICHIGAN

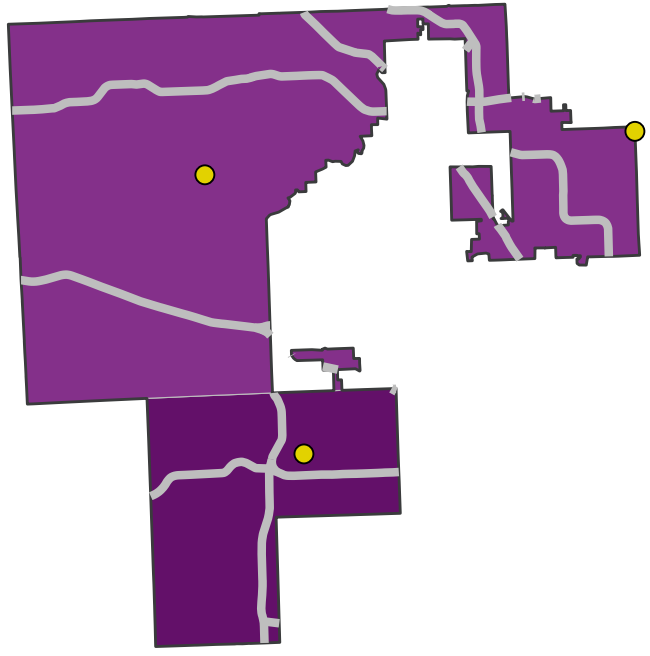
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 11



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

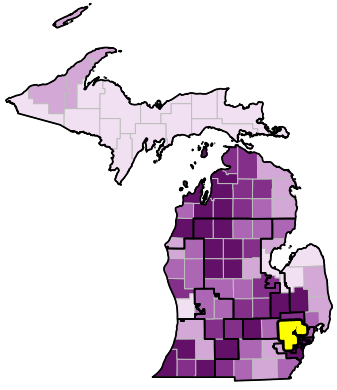
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 11

The map for Congressional District 11 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 87 − 95 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 11 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253801

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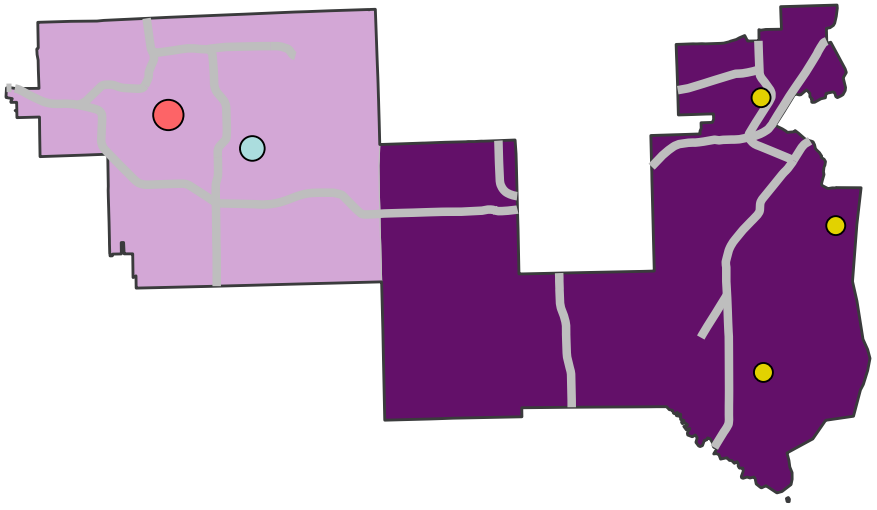
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 12



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

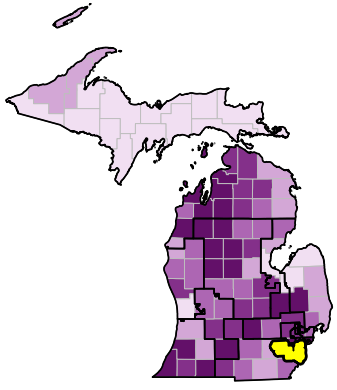
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 12

The map for Congressional District 12 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 95 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 12 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253802

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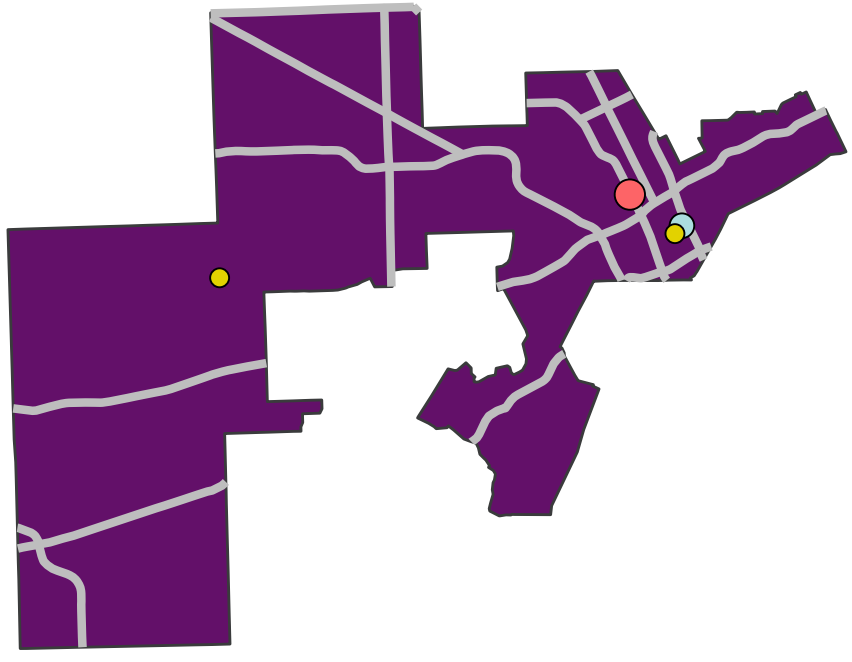
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 13



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 74
- 74 − 82
- 82 − 87
- 87 − 95
- 95 − 132

- County*
- Highway

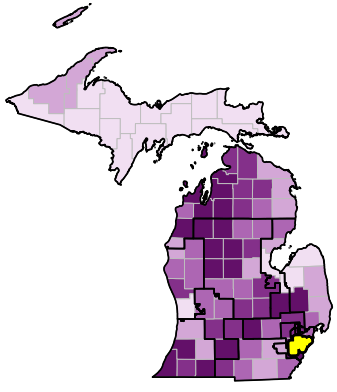
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Michigan

86 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MICHIGAN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Michigan Congressional District 13

The map for Congressional District 13 in Michigan shows that stroke death rates (ages 35+, 2021 − 2023) for Wayne County, the single county represented in the district, is 95 per 100,000. For Michigan and the United States, stroke death rates are 86 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 13 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253803

MINNESOTA

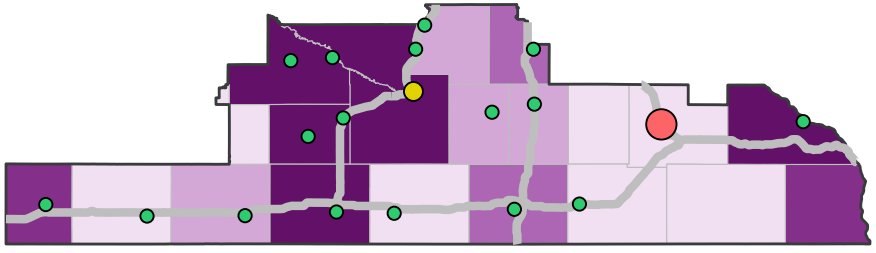
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

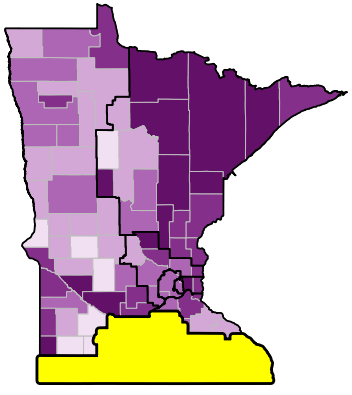
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MINNESOTA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 1

The map for Congressional District 1 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 83 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 19 stroke centers in District 1 (17 Acute, 1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253804

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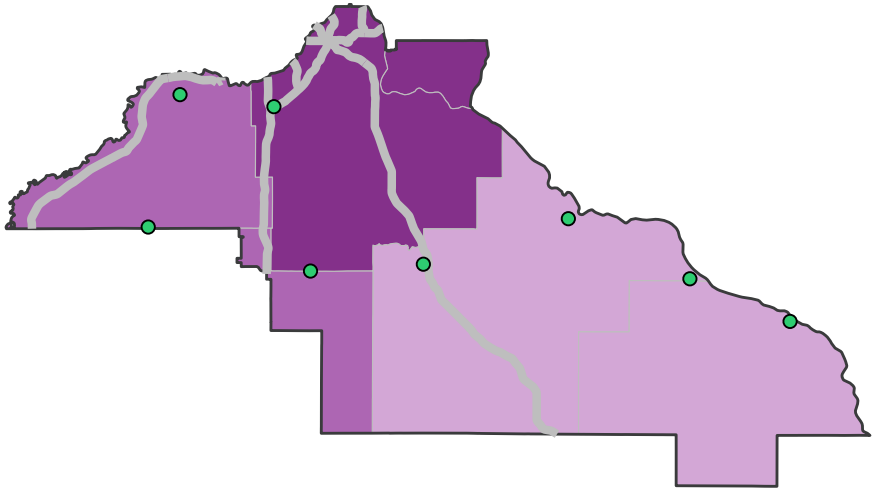
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

- County*
- Highway

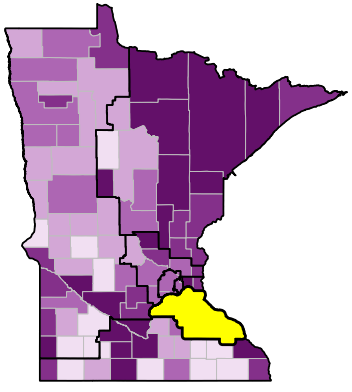
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MINNESOTA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 2

The map for Congressional District 2 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 67 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 2 (8 Acute).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253805

MINNESOTA

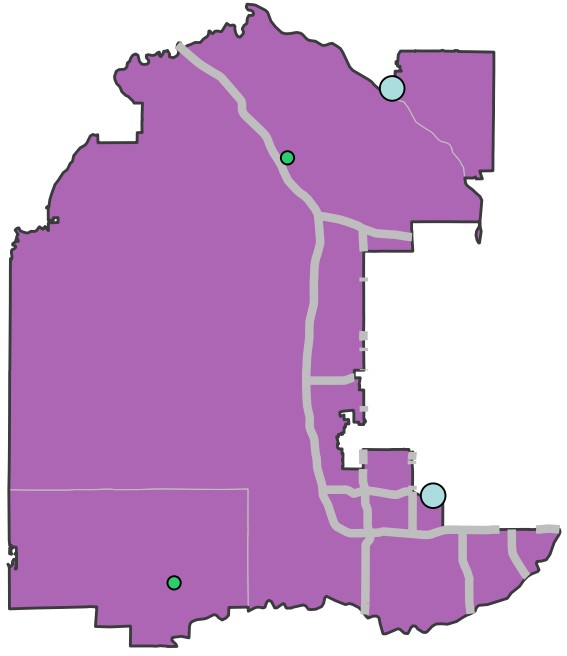
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

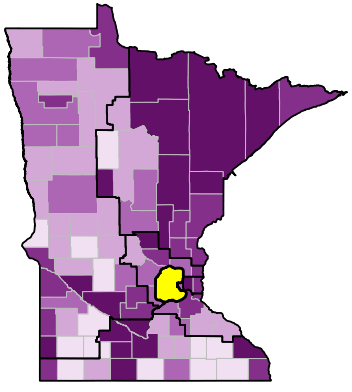
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 3

The map for Congressional District 3 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 62 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (2 Acute, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253806

MINNESOTA

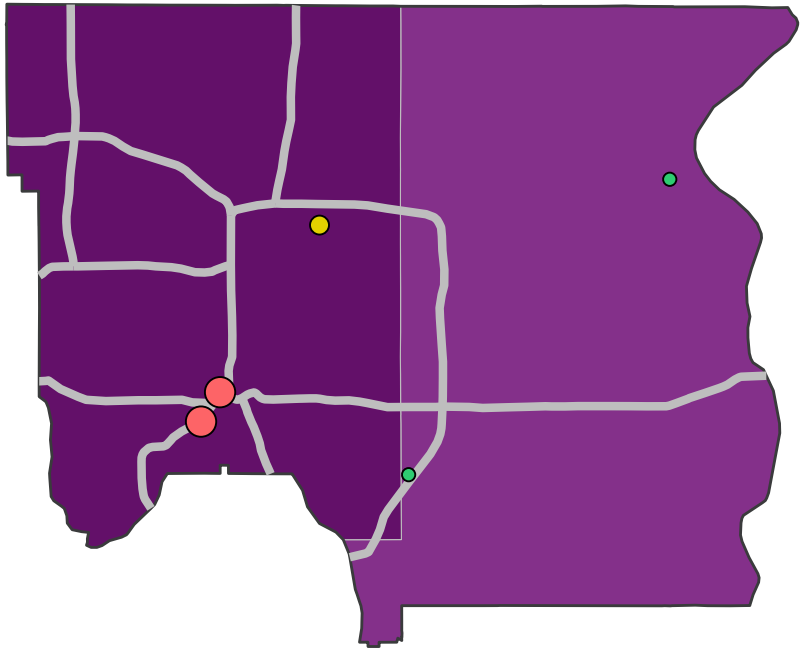
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

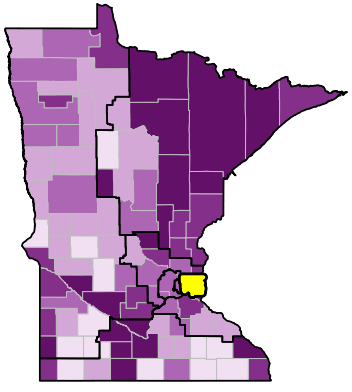
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 4

The map for Congressional District 4 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 78 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (2 Acute, 1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253807

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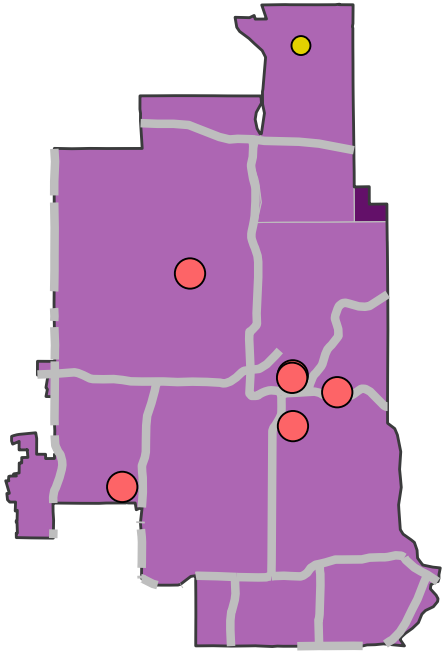
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

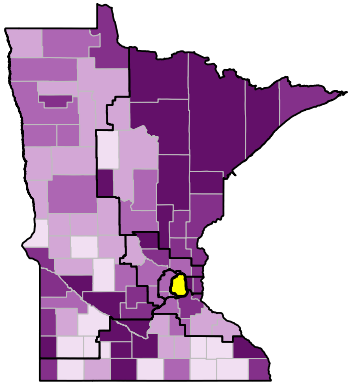
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 5

The map for Congressional District 5 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 78 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 5 (1 Primary, 6 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253808

MINNESOTA

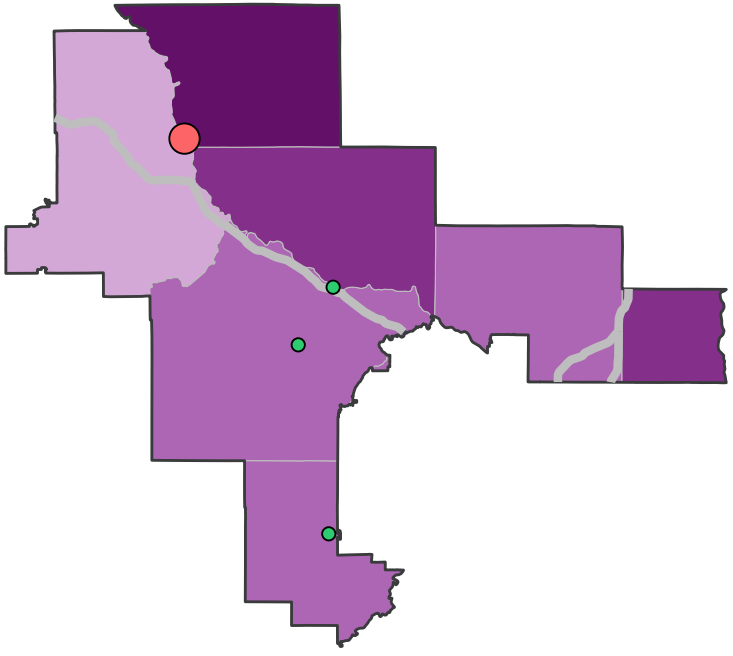
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

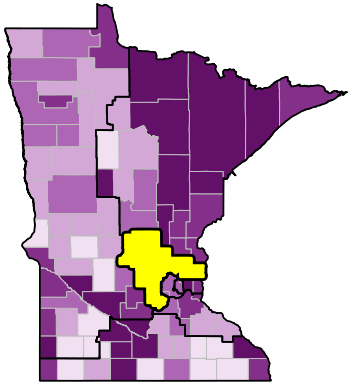
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 6

The map for Congressional District 6 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 71 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 6 (3 Acute, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253809

MINNESOTA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

- County*
- Highway

Stroke Centers

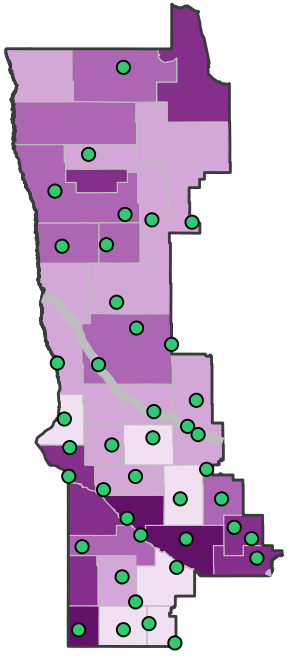
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

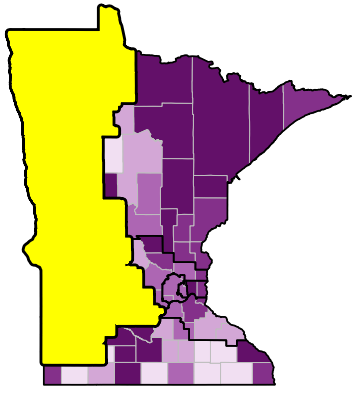
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 7

The map for Congressional District 7 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 77 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 41 stroke centers in District 7 (41 Acute).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253810

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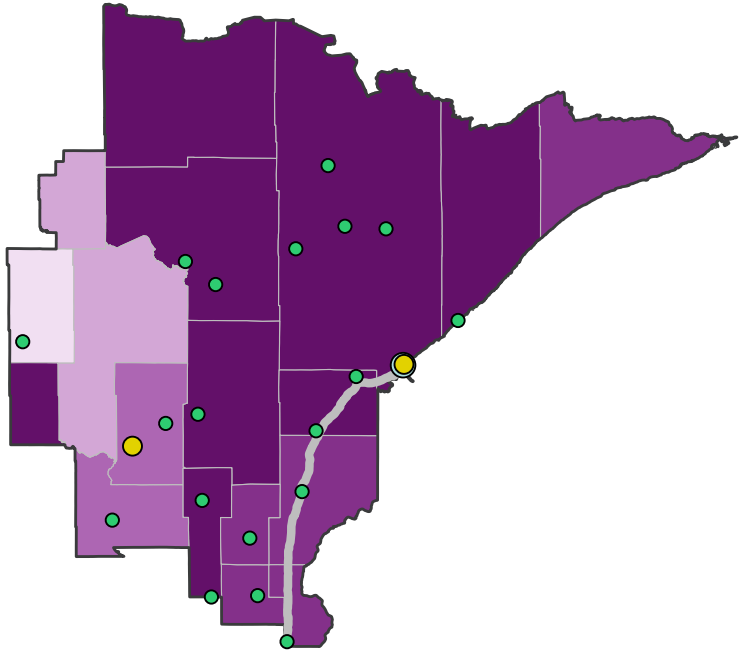
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 54
- 54 − 59
- 59 − 63
- 63 − 69
- 69 − 83

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

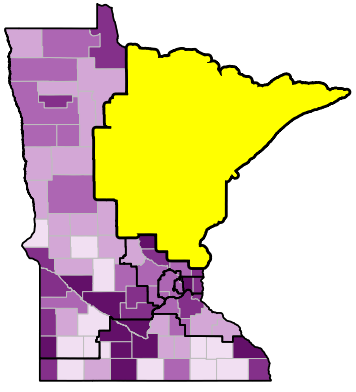
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Minnesota

62 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Minnesota Congressional District 8

The map for Congressional District 8 in Minnesota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 46 − 78 per 100,000. For Minnesota and the United States, stroke death rates are 62 and 80 per 100,000, respectively.

There are a total of 22 stroke centers in District 8 (19 Acute, 2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253811

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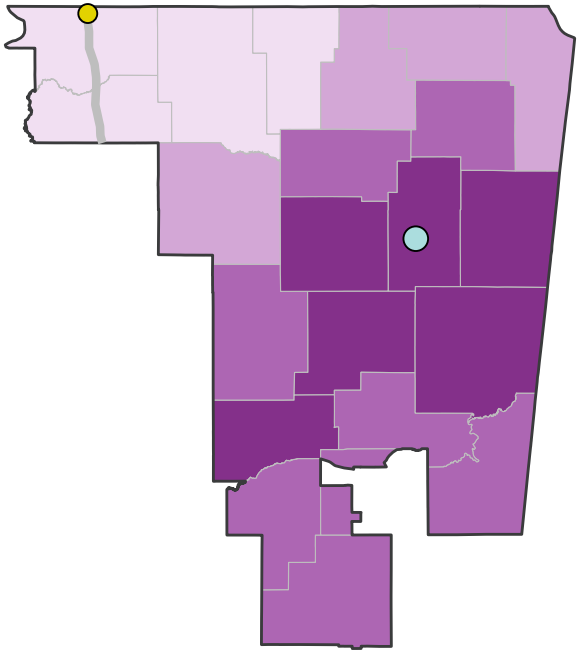
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 60 − 94
- 94 − 104
- 104 − 113
- 113 − 123
- 123 − 157

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

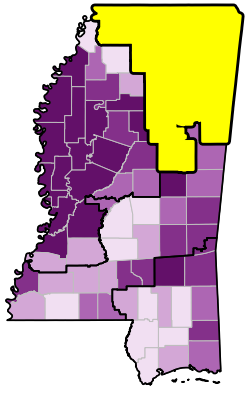
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Mississippi

110 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Mississippi Congressional District 1

The map for Congressional District 1 in Mississippi shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 85 − 121 per 100,000. For Mississippi and the United States, stroke death rates are 110 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 1 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253812

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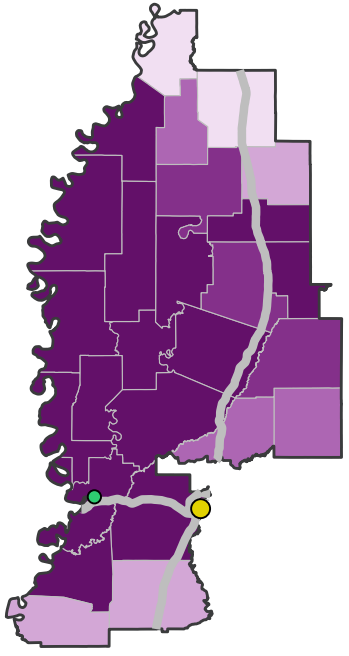
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 60 − 94
- 94 − 104
- 104 − 113
- 113 − 123
- 123 − 157

- County*
- Highway

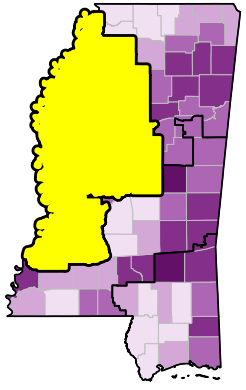
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Mississippi

110 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Mississippi Congressional District 2

The map for Congressional District 2 in Mississippi shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 92 − 157 per 100,000. For Mississippi and the United States, stroke death rates are 110 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 2 (1 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253813

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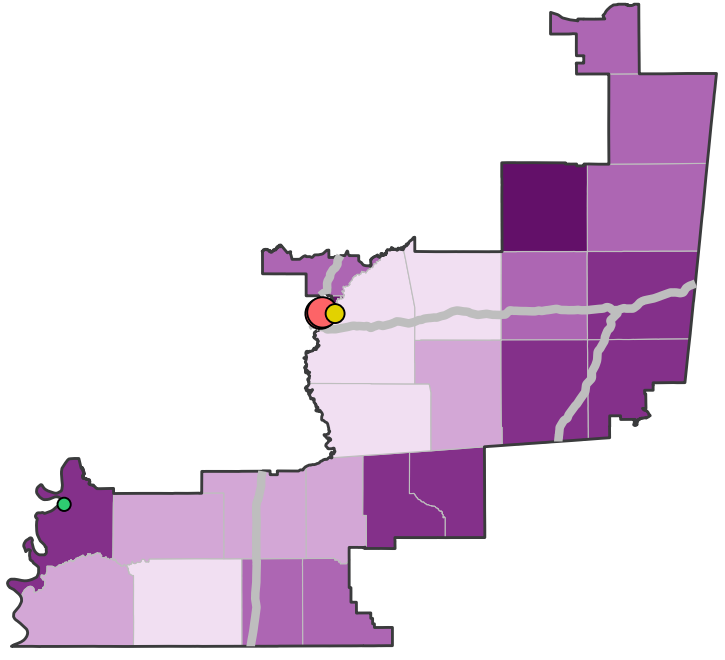
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 60 − 94
- 94 − 104
- 104 − 113
- 113 − 123
- 123 − 157

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

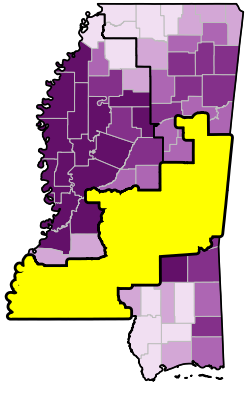
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Mississippi

110 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Mississippi Congressional District 3

The map for Congressional District 3 in Mississippi shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 130 per 100,000. For Mississippi and the United States, stroke death rates are 110 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (1 Acute, 1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253814

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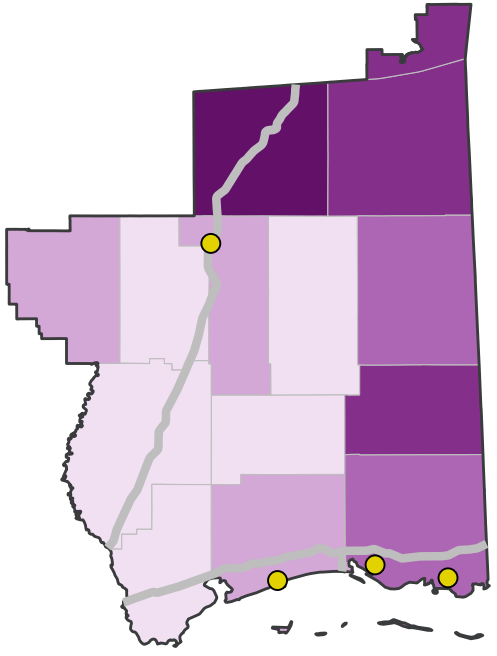
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 60 − 94
- 94 − 104
- 104 − 113
- 113 − 123
- 123 − 157

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

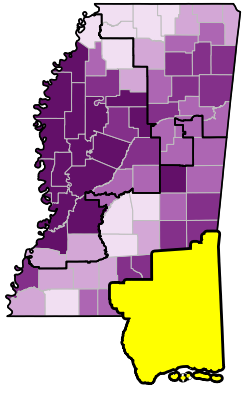
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Mississippi

110 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Mississippi Congressional District 4

The map for Congressional District 4 in Mississippi shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 135 per 100,000. For Mississippi and the United States, stroke death rates are 110 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 4 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253815

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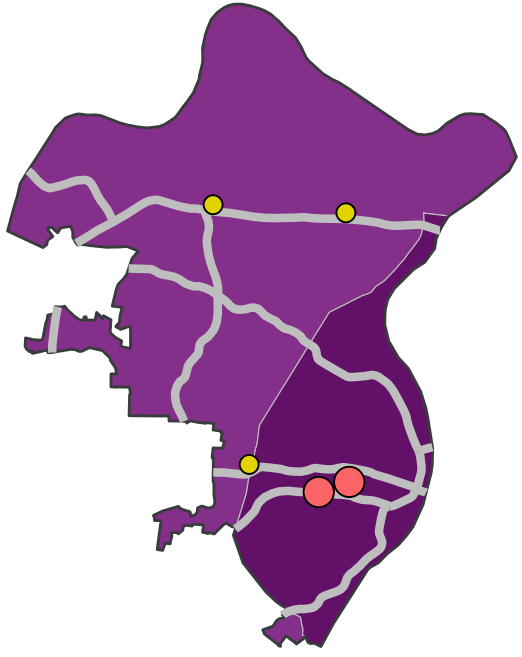
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

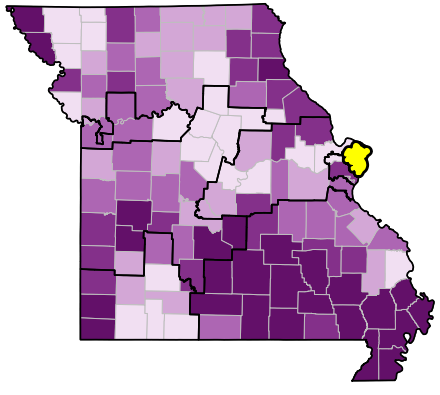
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 1

The map for Congressional District 1 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 81 − 87 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253816

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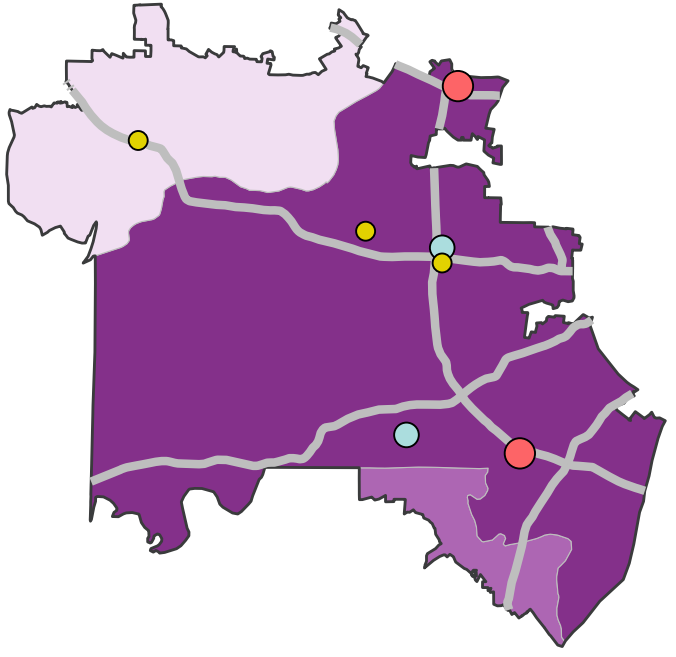
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

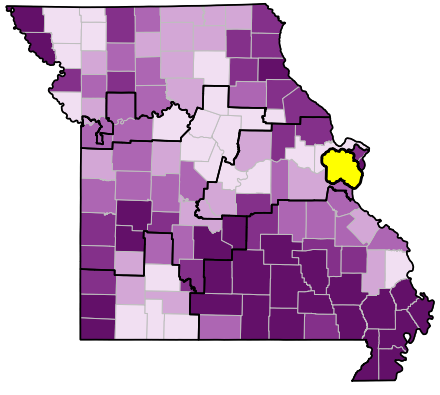
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 2

The map for Congressional District 2 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 81 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 2 (3 Primary, 2 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253817

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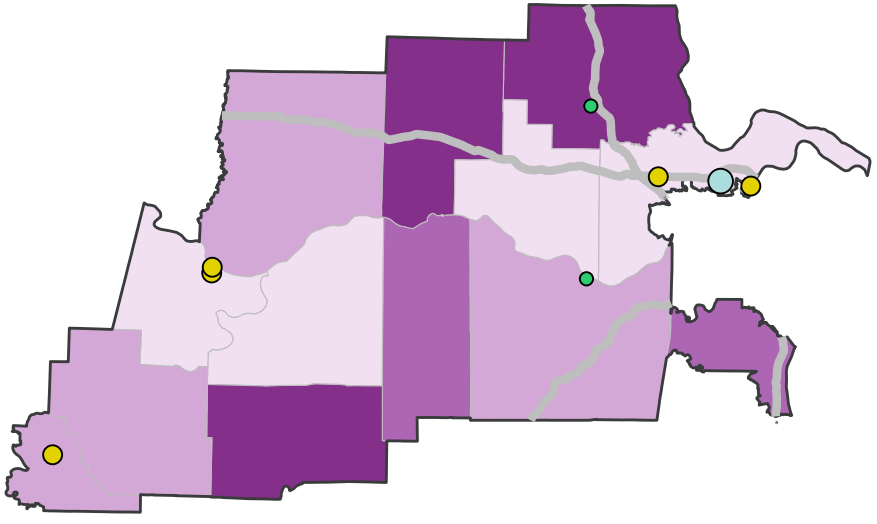
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

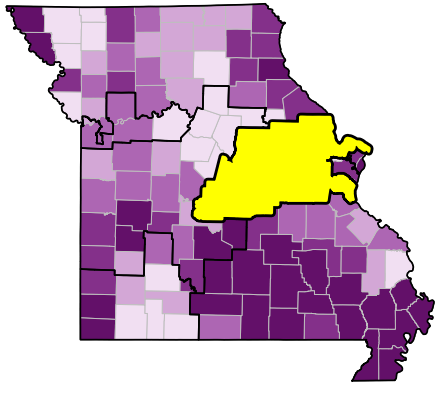
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 3

The map for Congressional District 3 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 85 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 3 (2 Acute, 5 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253818

MISSOURI

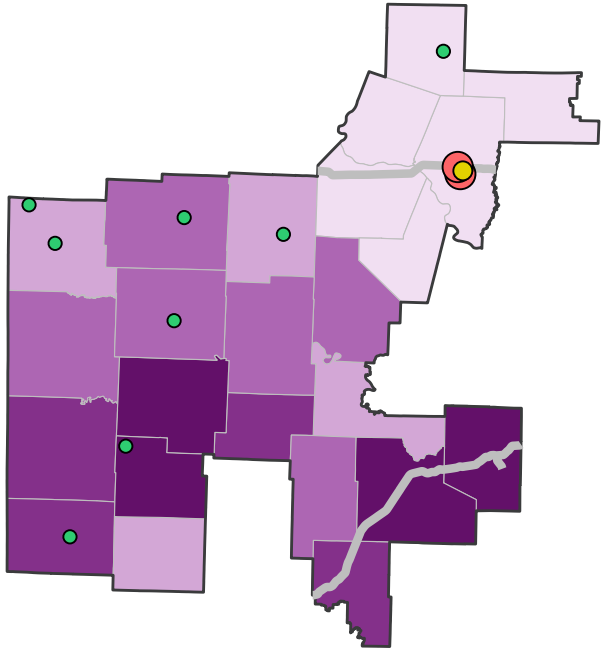
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

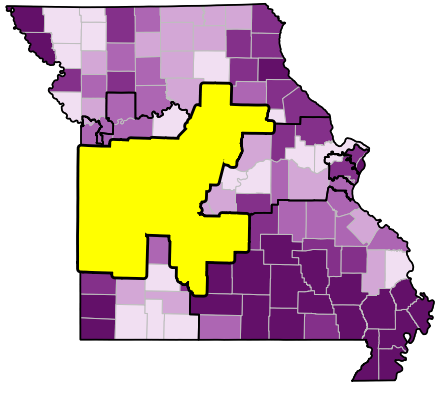
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MISSOURI

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 4

The map for Congressional District 4 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 121 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 11 stroke centers in District 4 (8 Acute, 1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253819

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

Stroke Centers

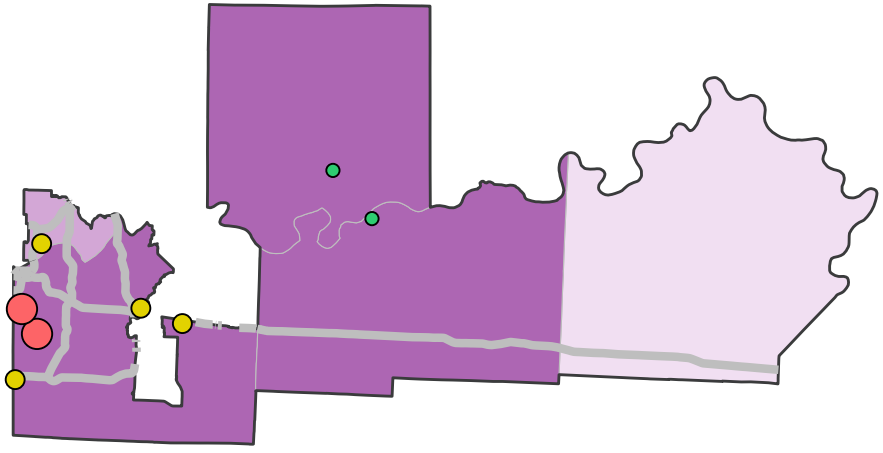
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

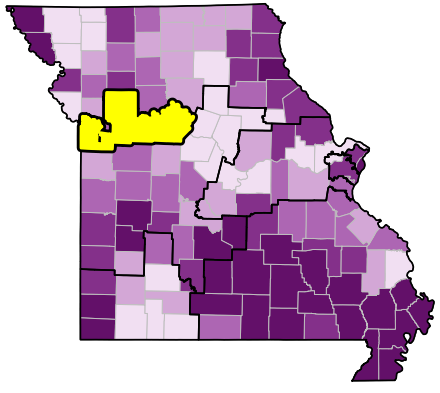
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MISSOURI

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 5

The map for Congressional District 5 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 75 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 5 (2 Acute, 4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253820

MISSOURI

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

County*
Highway

Stroke Centers

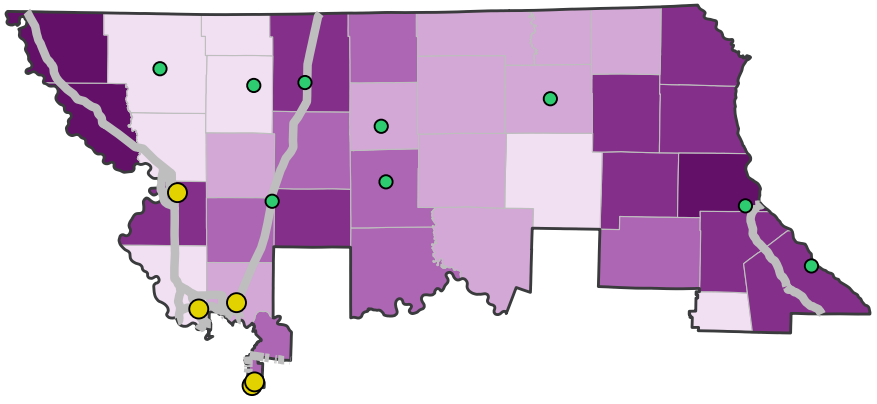
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

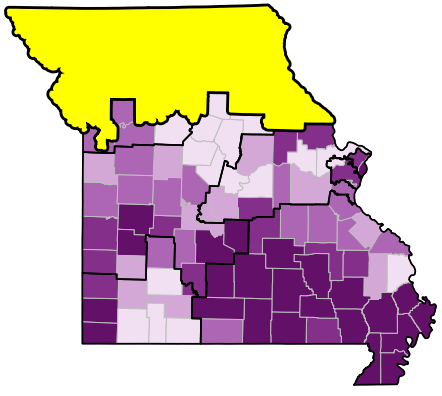
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MISSOURI

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 6

The map for Congressional District 6 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 90 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 14 stroke centers in District 6 (9 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253821

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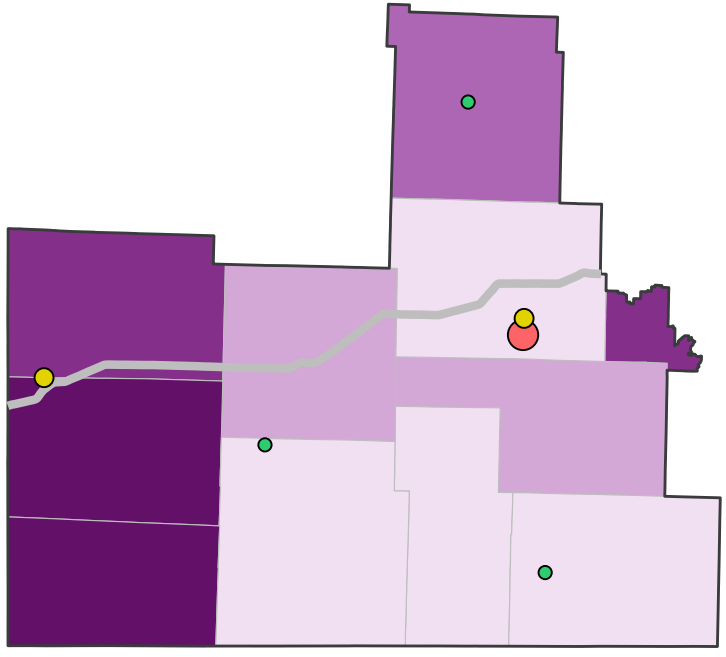
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

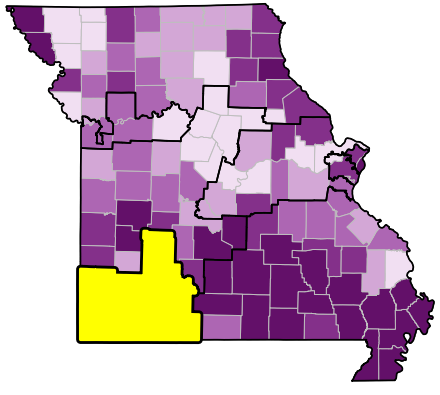
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 7

The map for Congressional District 7 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 88 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 7 (3 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253822

MISSOURI

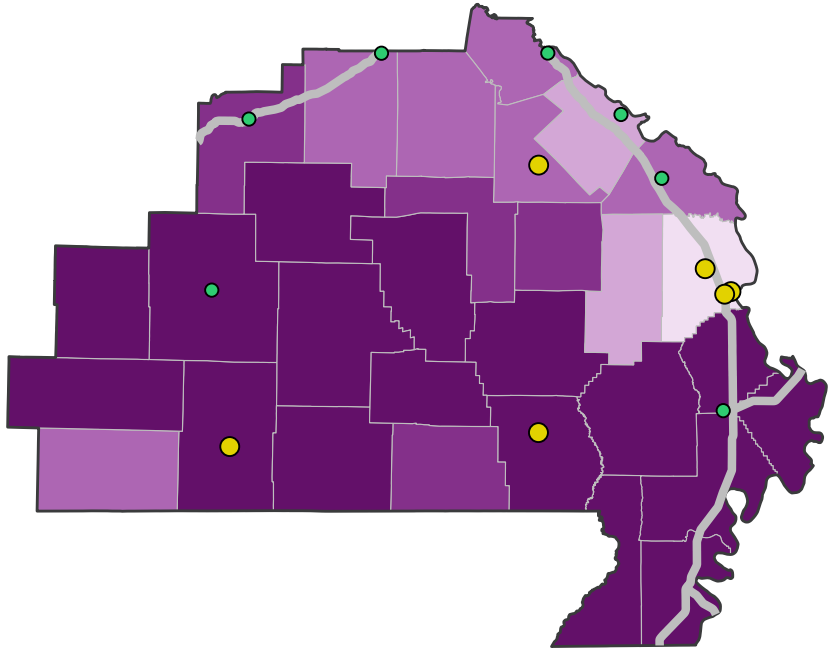
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 70
- 70 − 74
- 74 − 78
- 78 − 87
- 87 − 122

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

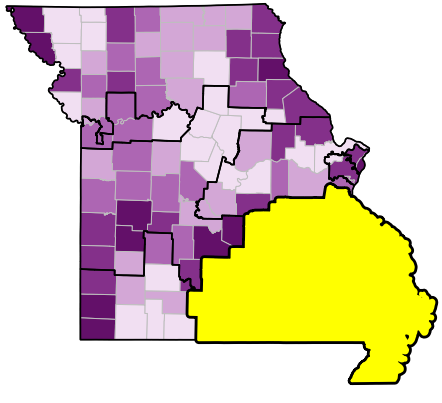
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Missouri

79 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MISSOURI

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Missouri Congressional District 8

The map for Congressional District 8 in Missouri shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 122 per 100,000. For Missouri and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 13 stroke centers in District 8 (7 Acute, 6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253823

MONTANA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 39 − 52
- 52 − 55
- 55 − 58
- 58 − 64
- 64 − 82

County*
Highway

Stroke Centers

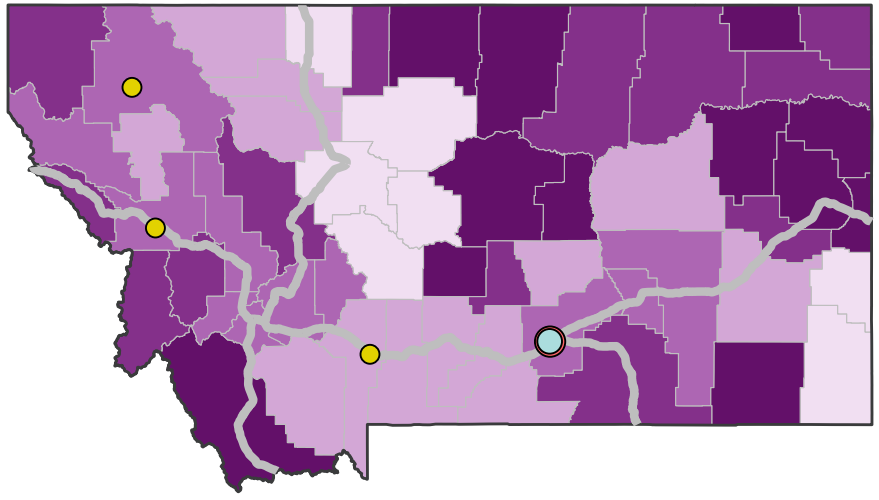
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Montana

58 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MONTANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Montana Congressional District 1

The map for Congressional District 1 in Montana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 82 per 100,000. For Montana and the United States, stroke death rates are 58 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253824

MONTANA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 39 − 52
- 52 − 55
- 55 − 58
- 58 − 64
- 64 − 82

County*
Highway

Stroke Centers

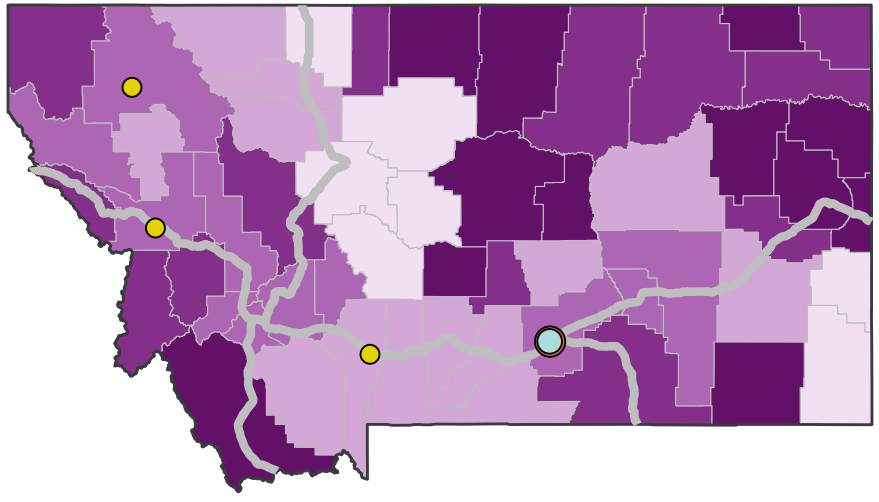
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Montana

58 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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MONTANA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Montana Congressional District 2

The map for Congressional District 2 in Montana shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 82 per 100,000. For Montana and the United States, stroke death rates are 58 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253825

NEBRASKA

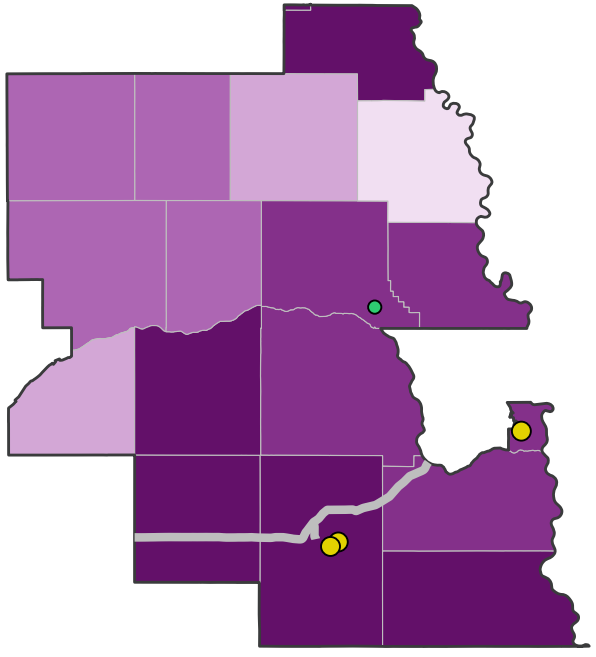
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 60
- 60 − 66
- 66 − 69
- 69 − 73
- 73 − 91
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

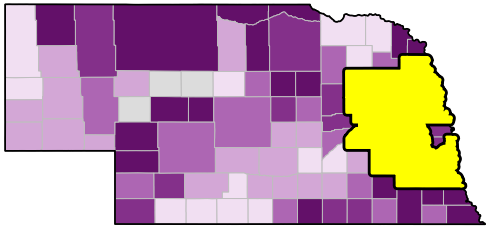
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nebraska

67 per 100,000 persons



Congressional District 1

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NEBRASKA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nebraska Congressional District 1

The map for Congressional District 1 in Nebraska shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 91 per 100,000. For Nebraska and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (1 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253826

NEBRASKA

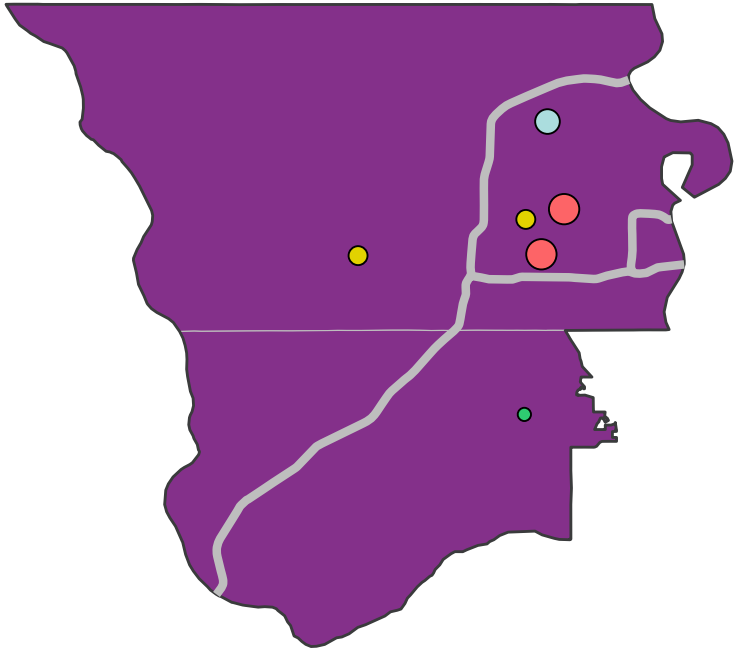
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 60
- 60 − 66
- 66 − 69
- 69 − 73
- 73 − 91
- Insufficient Data
- County*
- Highway

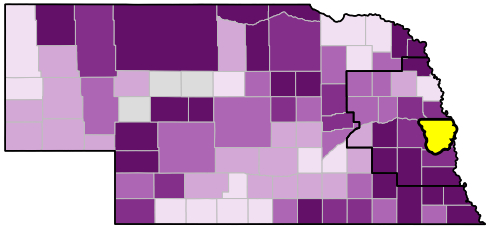
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nebraska

67 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEBRASKA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nebraska Congressional District 2

The map for Congressional District 2 in Nebraska shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 70 per 100,000. For Nebraska and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (1 Acute, 2 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253827

NEBRASKA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 60
- 60 − 66
- 66 − 69
- 69 − 73
- 73 − 91
- Insufficient Data
- County*
- Highway

Stroke Centers

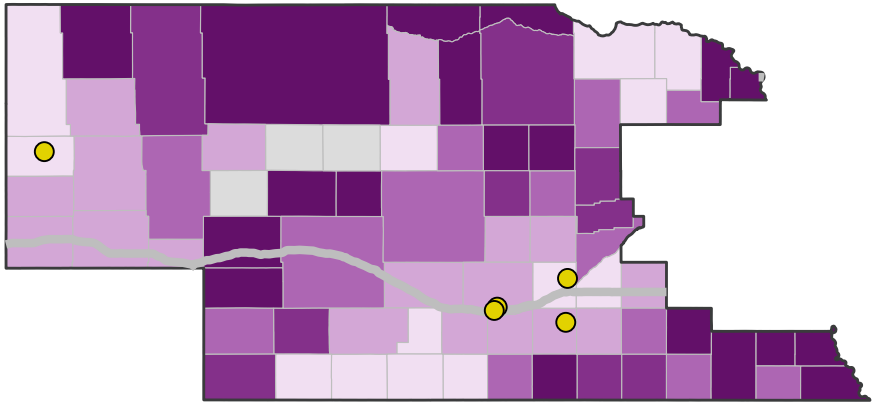
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

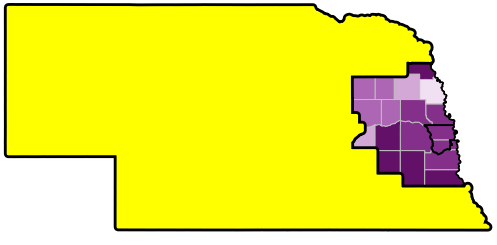
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Nebraska

67 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEBRASKA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nebraska Congressional District 3

The map for Congressional District 3 in Nebraska shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 88 per 100,000. For Nebraska and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 3 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253828

NEVADA

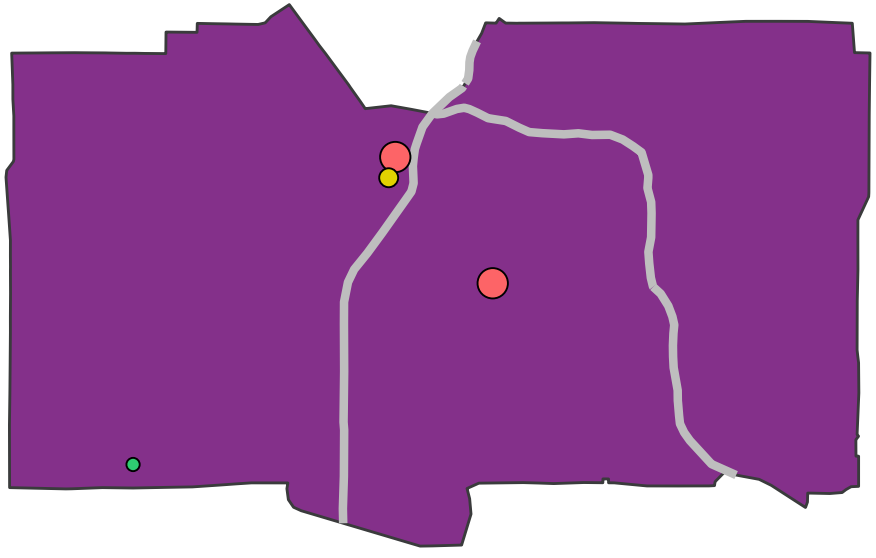
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 57 − 59
- 59 − 69
- 69 − 71
- 71 − 97
- 97 − 103

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

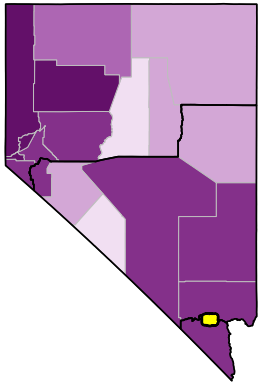
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nevada

76 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nevada Congressional District 1

The map for Congressional District 1 in Nevada shows that stroke death rates (ages 35+, 2021 − 2023) for Clark County, the single county represented in the district, is 71 per 100,000. For Nevada and the United States, stroke death rates are 76 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (1 Acute, 1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253829

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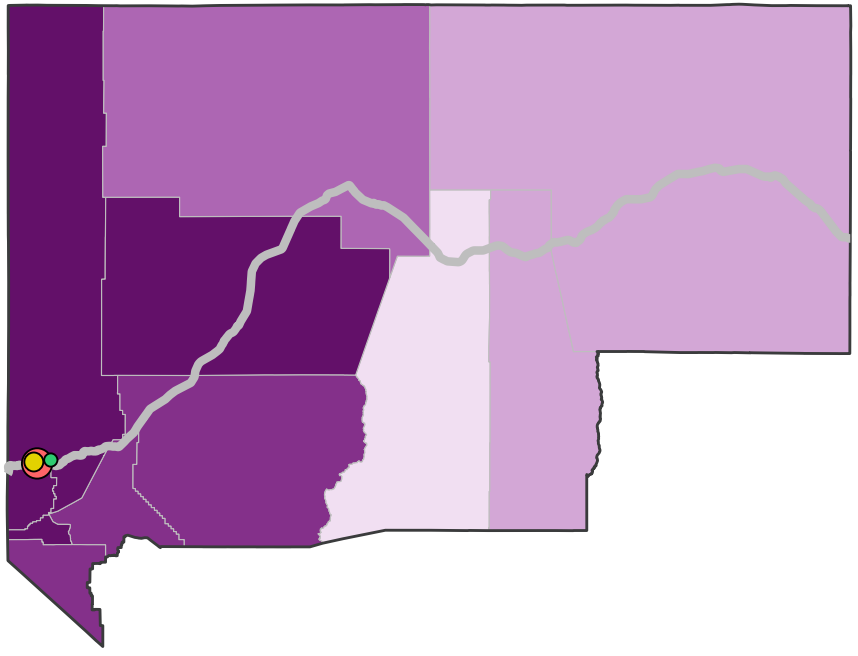
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 57 − 59
- 59 − 69
- 69 − 71
- 71 − 97
- 97 − 103

- County*
- Highway

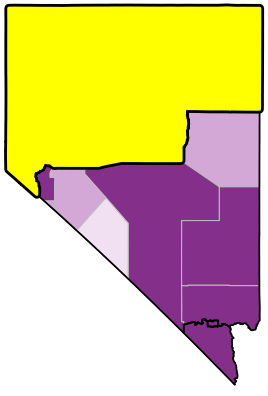
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nevada

76 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nevada Congressional District 2

The map for Congressional District 2 in Nevada shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 103 per 100,000. For Nevada and the United States, stroke death rates are 76 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (1 Acute, 1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253830

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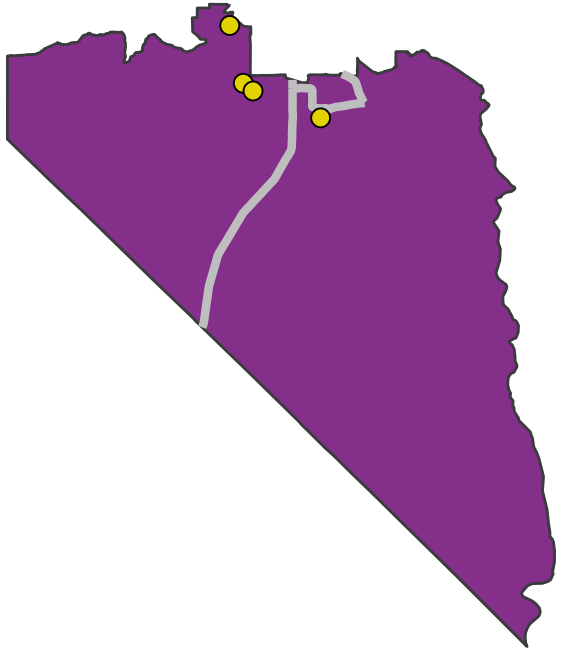
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 3



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 57 − 59
- 59 − 69
- 69 − 71
- 71 − 97
- 97 − 103

- County*
- Highway

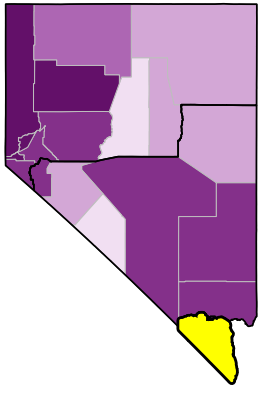
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nevada

76 per 100,000 persons



Congressional District 3

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nevada Congressional District 3

The map for Congressional District 3 in Nevada shows that stroke death rates (ages 35+, 2021 − 2023) for Clark County, the single county represented in the district, is 71 per 100,000. For Nevada and the United States, stroke death rates are 76 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253831

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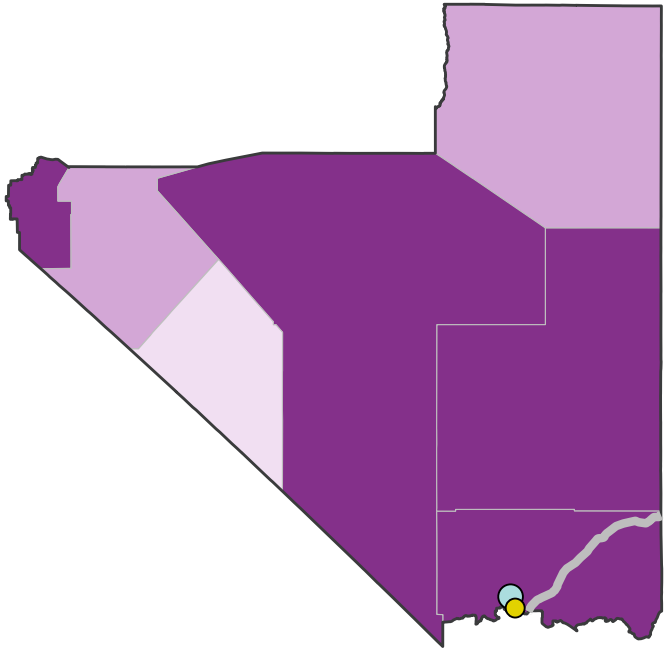
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 57 − 59
- 59 − 69
- 69 − 71
- 71 − 97
- 97 − 103

- County*
- Highway

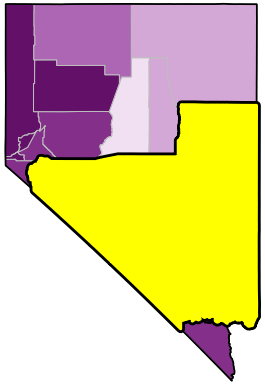
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Nevada

76 per 100,000 persons



Congressional District 4

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Nevada Congressional District 4

The map for Congressional District 4 in Nevada shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 58 − 76 per 100,000. For Nevada and the United States, stroke death rates are 76 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 4 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253832

NEW HAMPSHIRE

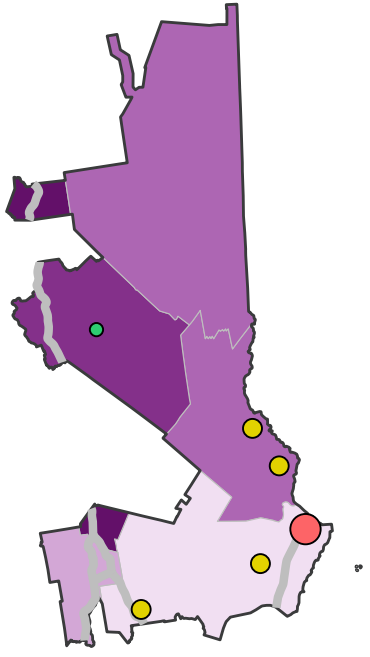
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 56
- 56 − 58
- 58 − 62
- 62 − 64
- 64 − 65

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

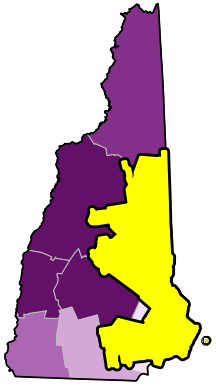
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Hampshire

60 per 100,000 persons



Congressional District 1

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NEW HAMPSHIRE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Hampshire Congressional District 1

The map for Congressional District 1 in New Hampshire shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 65 per 100,000. For New Hampshire and the United States, stroke death rates are 60 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (1 Acute, 4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253833

NEW HAMPSHIRE

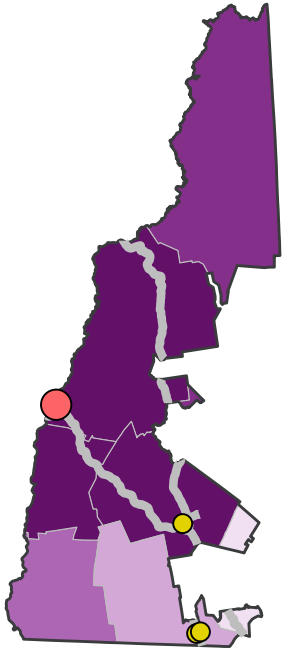
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 56
- 56 − 58
- 58 − 62
- 62 − 64
- 64 − 65

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

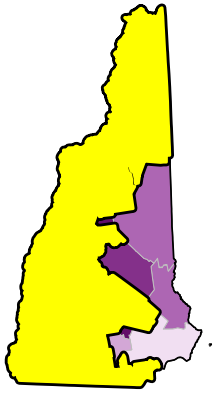
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Hampshire

60 per 100,000 persons



Congressional District 2

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Hampshire Congressional District 2

The map for Congressional District 2 in New Hampshire shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 65 per 100,000. For New Hampshire and the United States, stroke death rates are 60 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253834

NEW HAMPSHIRE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 56
- 56 − 58
- 58 − 62
- 62 − 64
- 64 − 65

County*

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

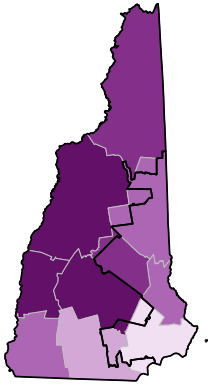
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Hampshire

60 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW HAMPSHIRE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Hampshire Congressional District 3

The map for Congressional District 3 in New Hampshire shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For New Hampshire and the United States, stroke death rates are 60 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 3 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

DOI NOT FOUND

NEW JERSEY

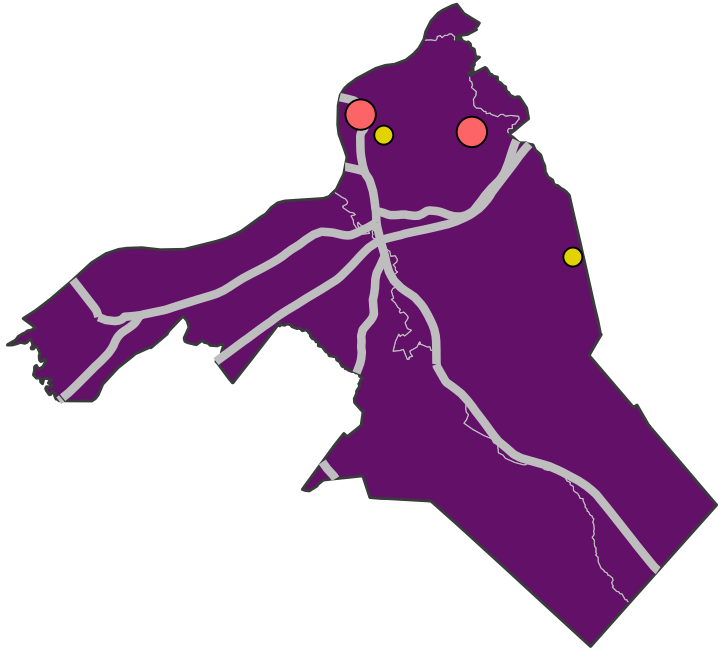
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

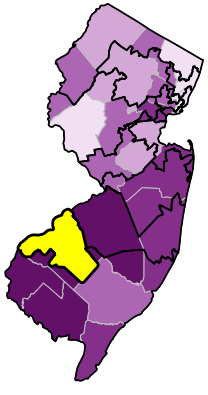
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 1

The map for Congressional District 1 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 82 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253835

NEW JERSEY

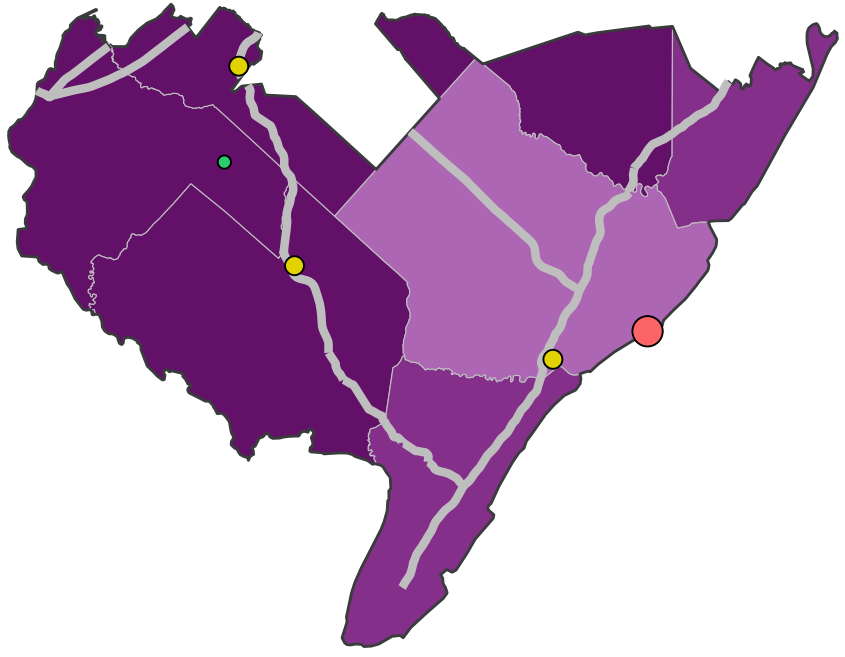
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

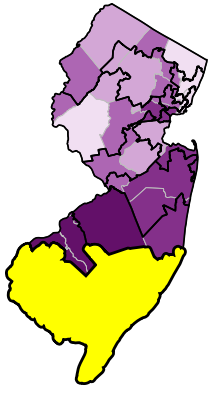
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 2

The map for Congressional District 2 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 86 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (1 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253836

NEW JERSEY

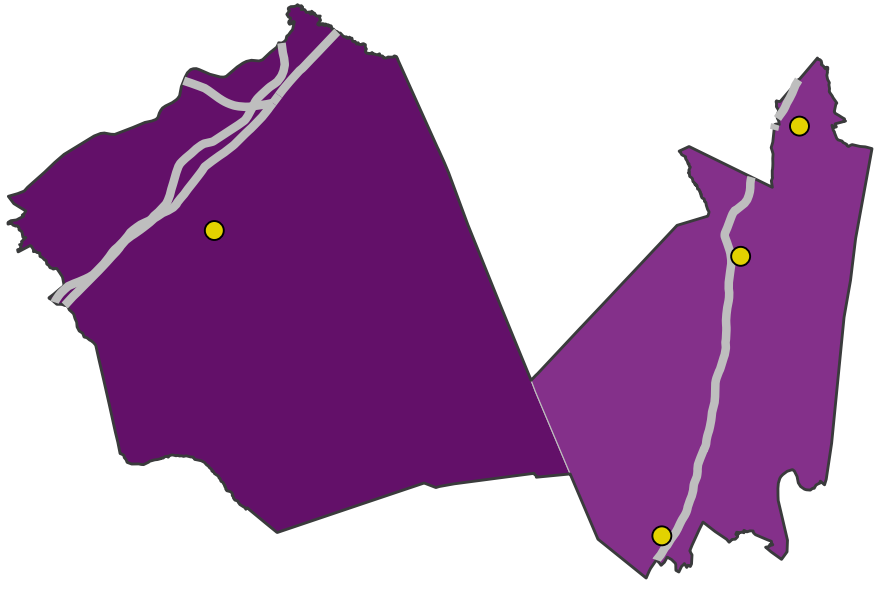
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

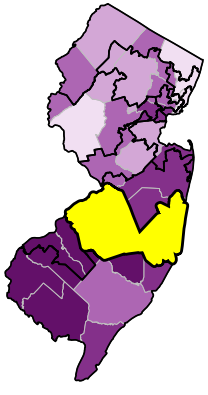
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 3

The map for Congressional District 3 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 70 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253837

NEW JERSEY

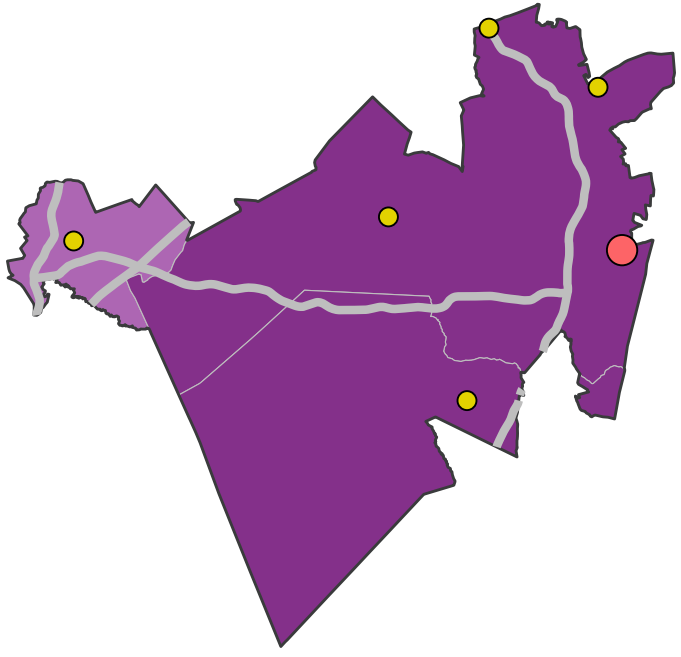
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

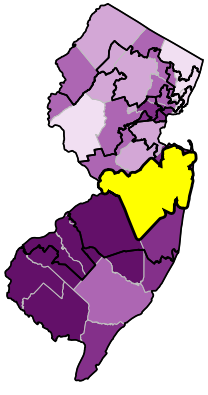
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 4

The map for Congressional District 4 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 58 − 66 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 4 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253838

NEW JERSEY

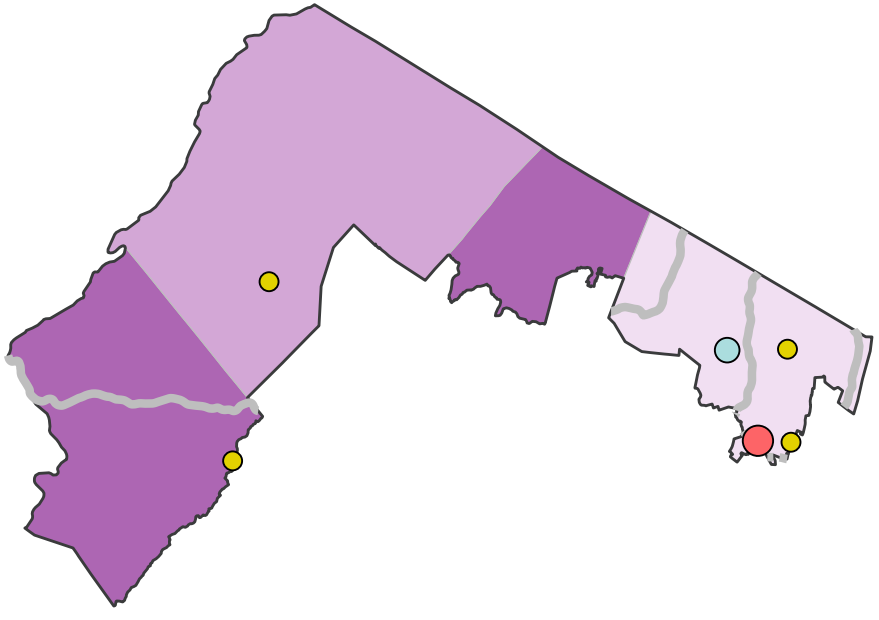
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

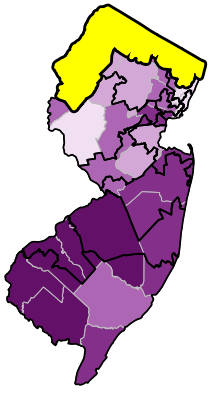
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 5

The map for Congressional District 5 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 50 − 57 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 5 (4 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253839

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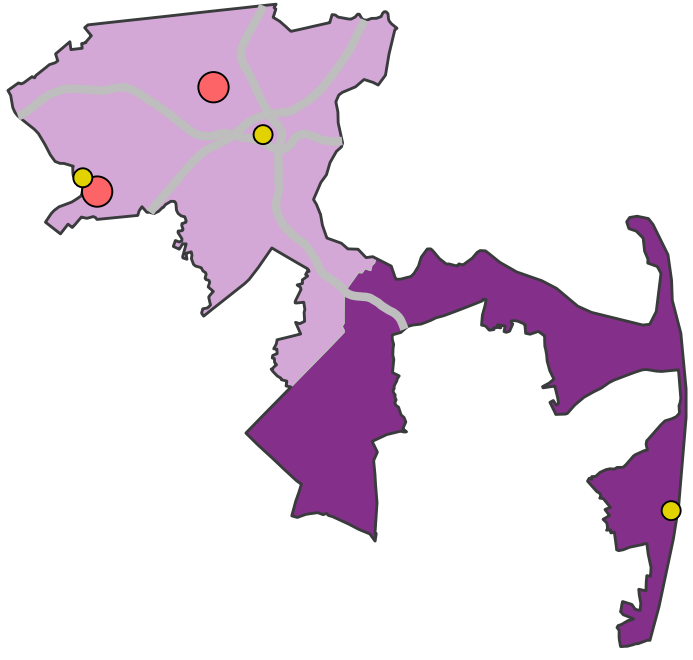
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

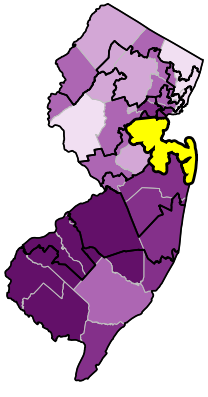
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 6

The map for Congressional District 6 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 66 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253840

NEW JERSEY

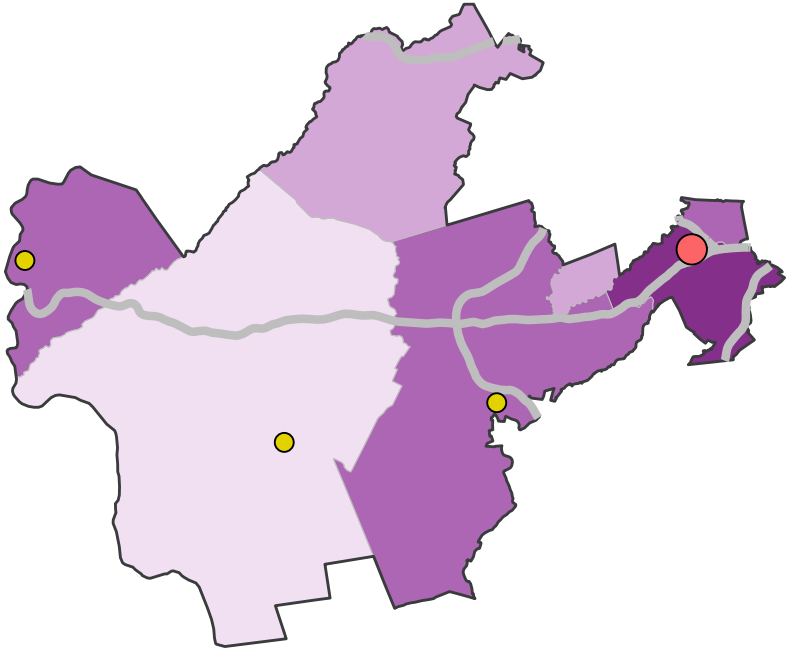
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

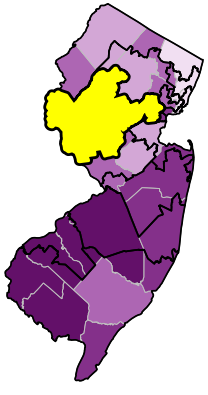
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 7

The map for Congressional District 7 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 62 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 7 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253841

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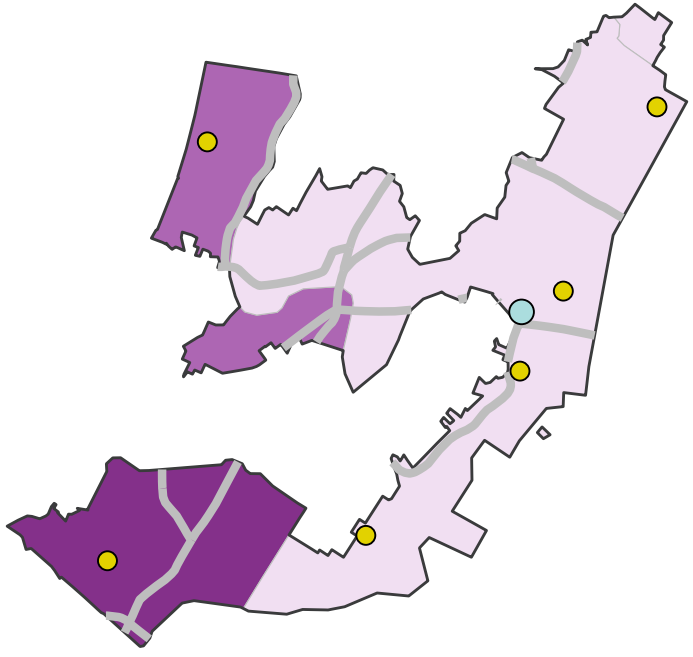
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

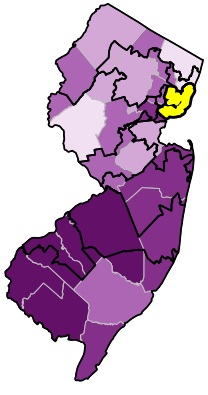
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 8

The map for Congressional District 8 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 43 − 62 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 8 (6 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253842

NEW JERSEY

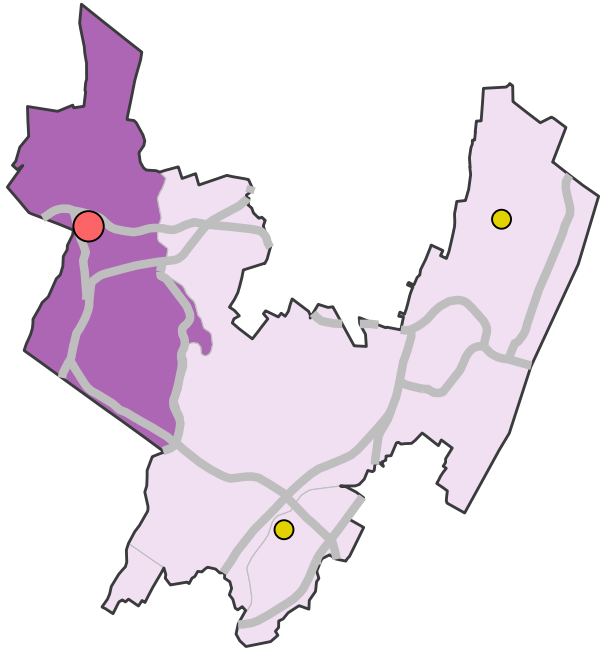
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

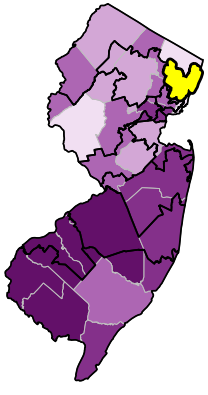
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 9

The map for Congressional District 9 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 43 − 56 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 9 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253843

NEW JERSEY

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

Stroke Centers

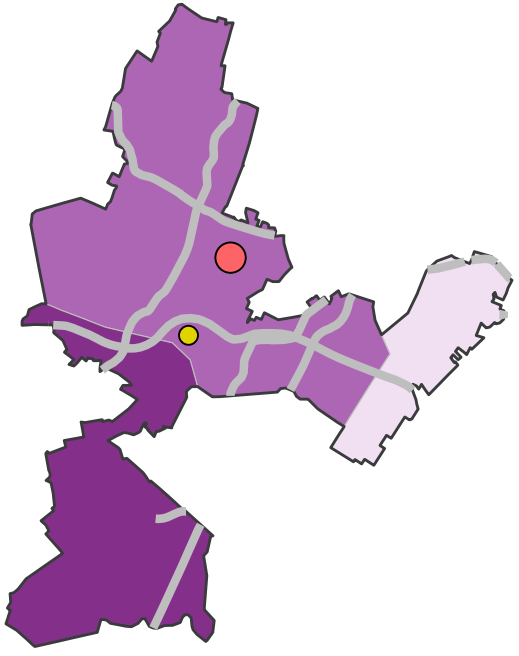
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

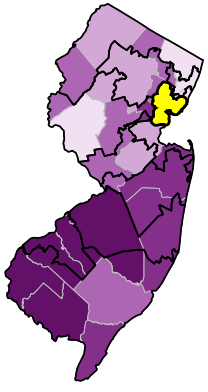
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 10

The map for Congressional District 10 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 43 − 62 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 10 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253844

NEW JERSEY

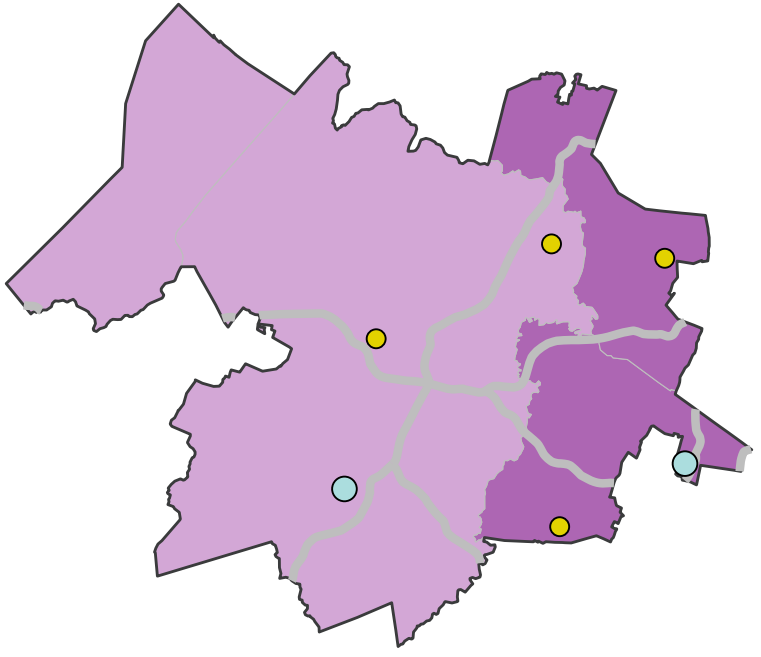
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

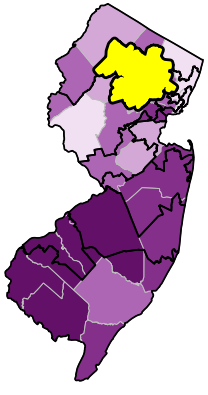
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW JERSEY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 11

The map for Congressional District 11 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 51 − 59 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 11 (4 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253845

NEW JERSEY

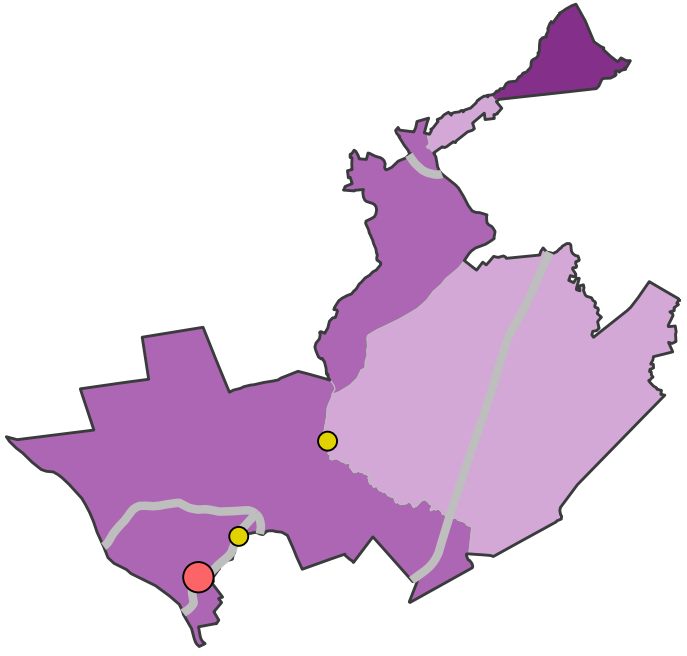
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 51
- 51 − 56
- 56 − 60
- 60 − 70
- 70 − 86

- County*
- Highway

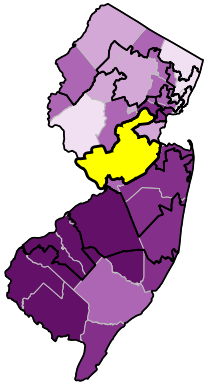
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Jersey

61 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW JERSEY

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Jersey Congressional District 12

The map for Congressional District 12 in New Jersey shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 62 per 100,000. For New Jersey and the United States, stroke death rates are 61 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 12 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253846

NEW MEXICO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 1



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 54
- 54 − 63
- 63 − 72
- 72 − 79
- 79 − 88
- County*
- Highway

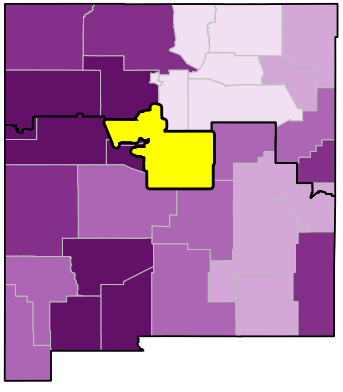
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Mexico

67 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW MEXICO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Mexico Congressional District 1

The map for Congressional District 1 in New Mexico shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 46 − 83 per 100,000. For New Mexico and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253847

NEW MEXICO

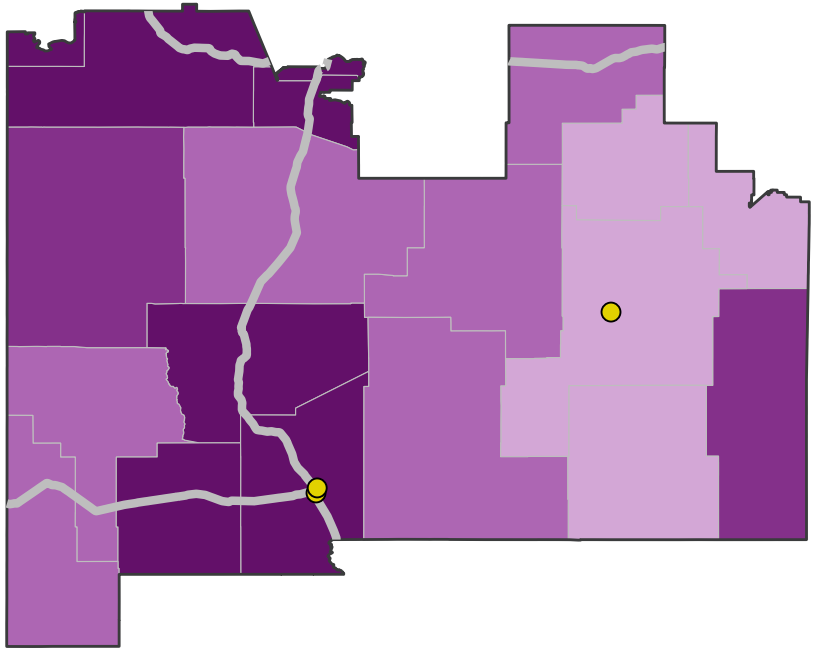
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 54
- 54 − 63
- 63 − 72
- 72 − 79
- 79 − 88

- County*
- Highway

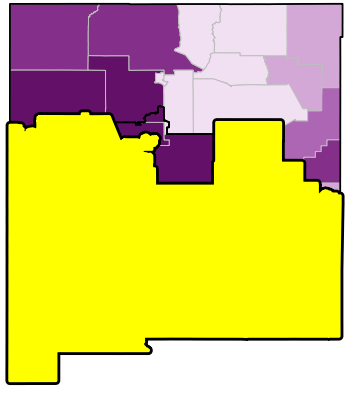
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Mexico

67 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW MEXICO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Mexico Congressional District 2

The map for Congressional District 2 in New Mexico shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 88 per 100,000. For New Mexico and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253848

NEW MEXICO

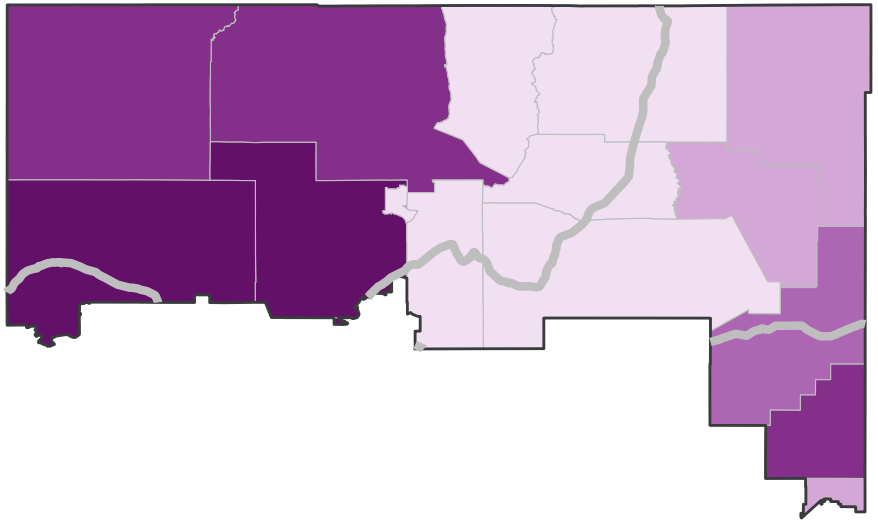
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 43 − 54
- 54 − 63
- 63 − 72
- 72 − 79
- 79 − 88

- County*
- Highway

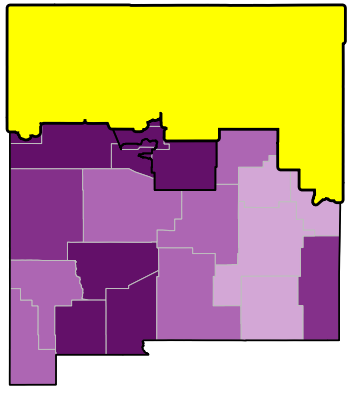
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New Mexico

67 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New Mexico Congressional District 3

The map for Congressional District 3 in New Mexico shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 43 − 83 per 100,000. For New Mexico and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 3 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253849

NEW YORK

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

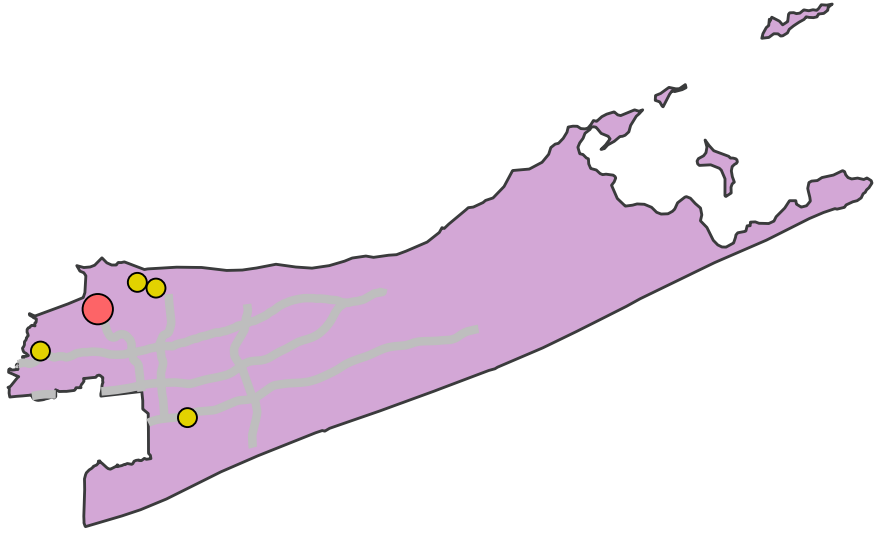
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

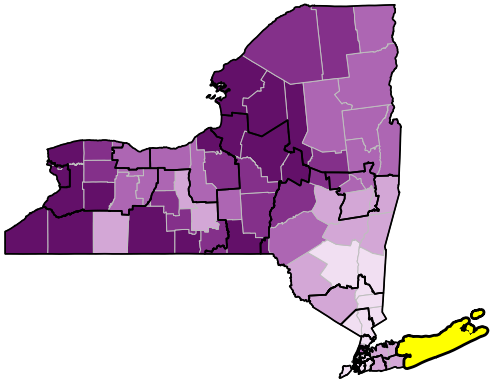
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 1

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 1

The map for Congressional District 1 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Suffolk County, the single county represented in the district, is 48 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253850

NEW YORK

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

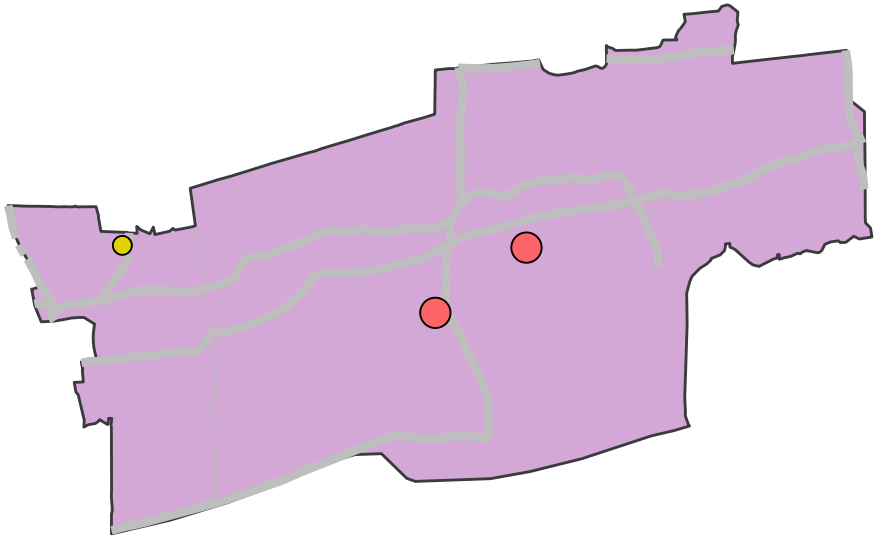
- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

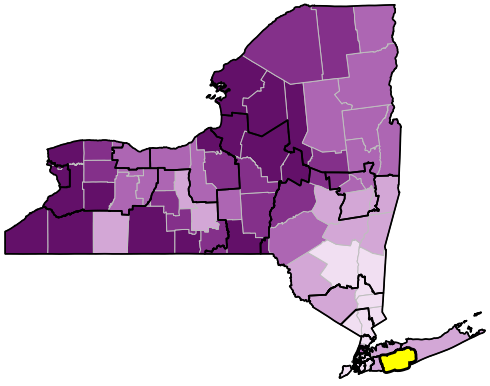
Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 2

The map for Congressional District 2 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 50 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (1 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253851

NEW YORK

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

County*
Highway

Stroke Centers

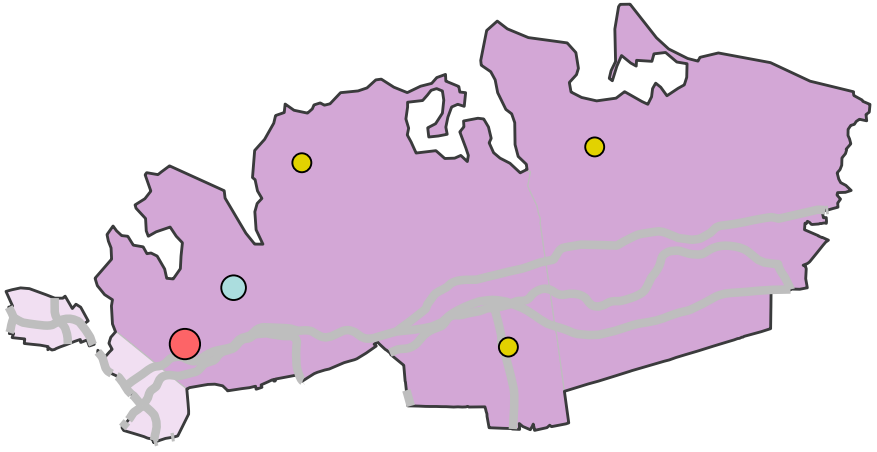
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

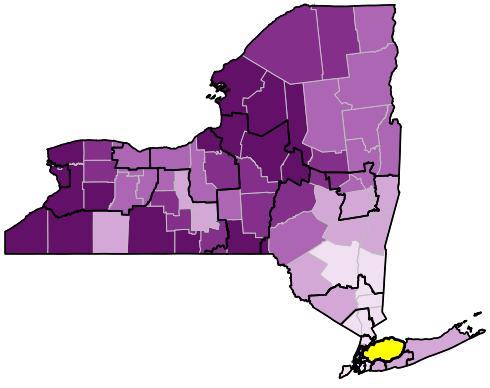
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 3

The map for Congressional District 3 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 40 − 50 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 3 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253852

NEW YORK

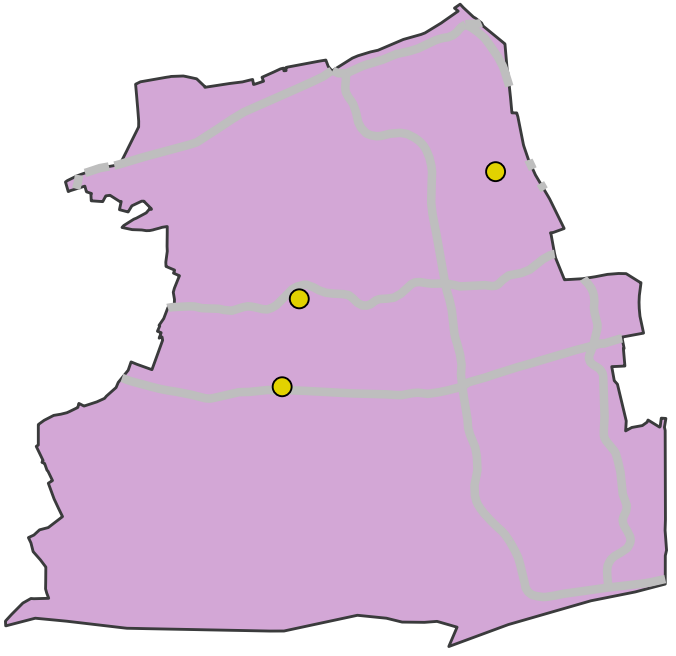
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

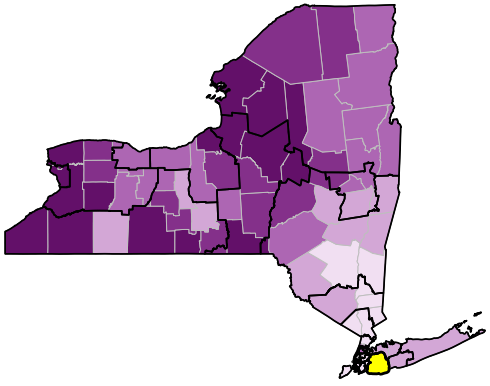
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 4

The map for Congressional District 4 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Nassau County, the single county represented in the district, is 50 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253853

NEW YORK

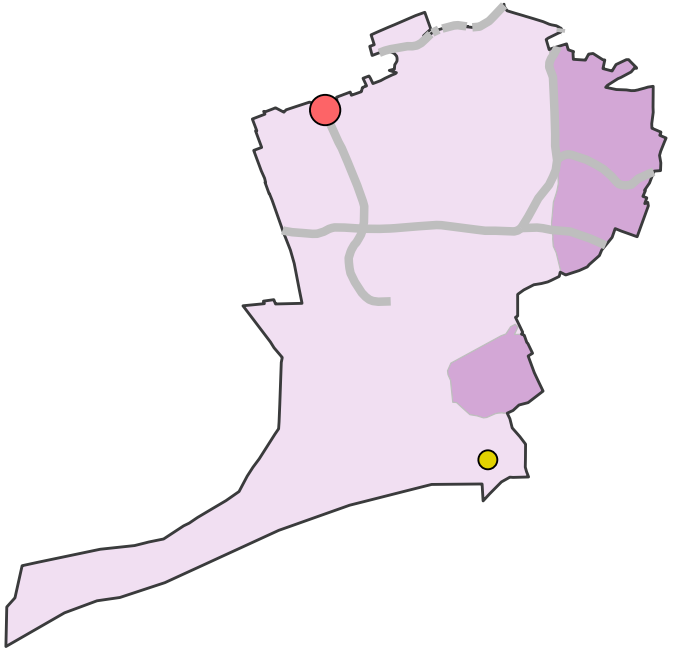
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

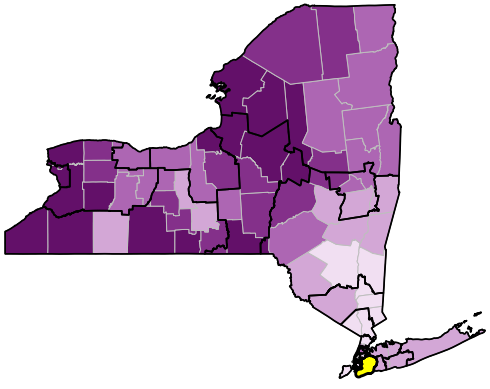
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 5

The map for Congressional District 5 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 40 − 50 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 5 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253854

NEW YORK

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

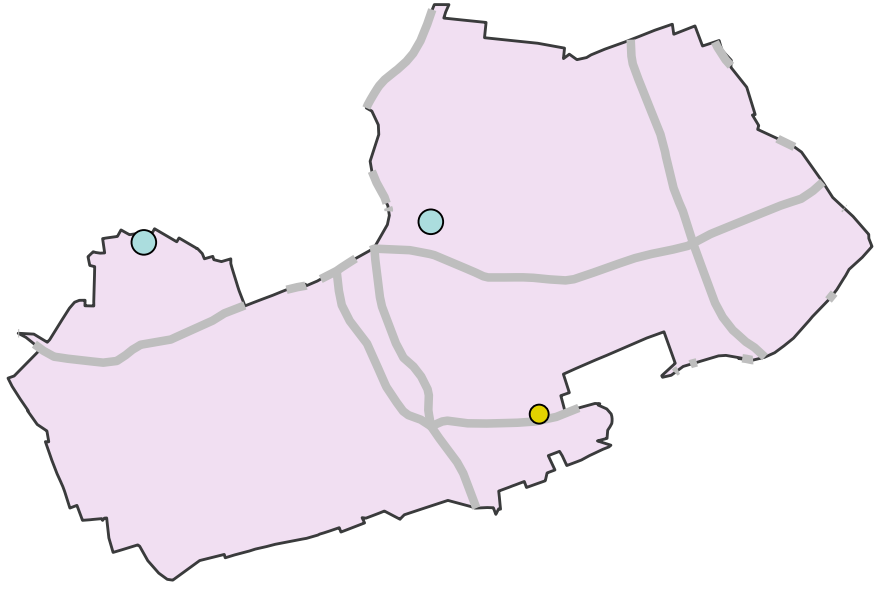
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

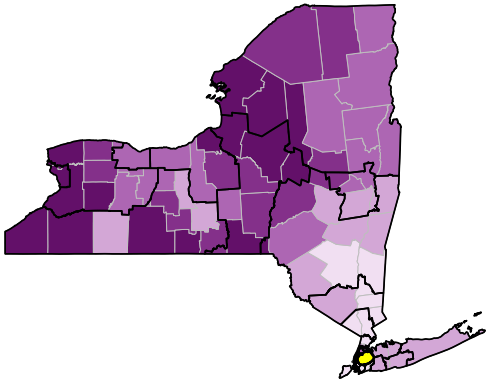
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 6

The map for Congressional District 6 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Queens County, the single county represented in the district, is 40 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 6 (1 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253855

NEW YORK

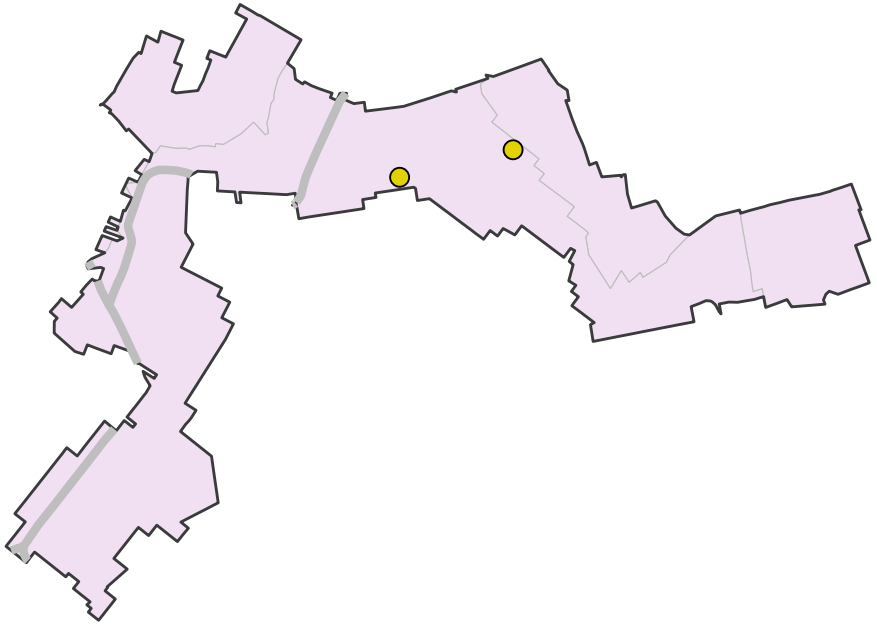
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

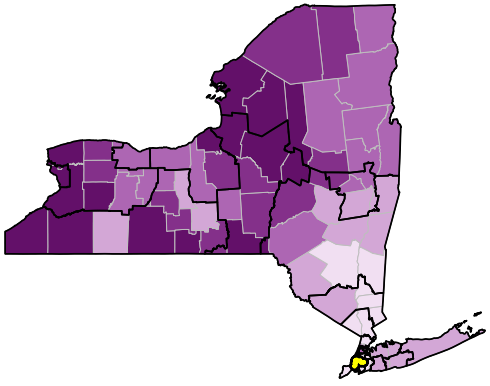
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 7

The map for Congressional District 7 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 36 − 40 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 7 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253856

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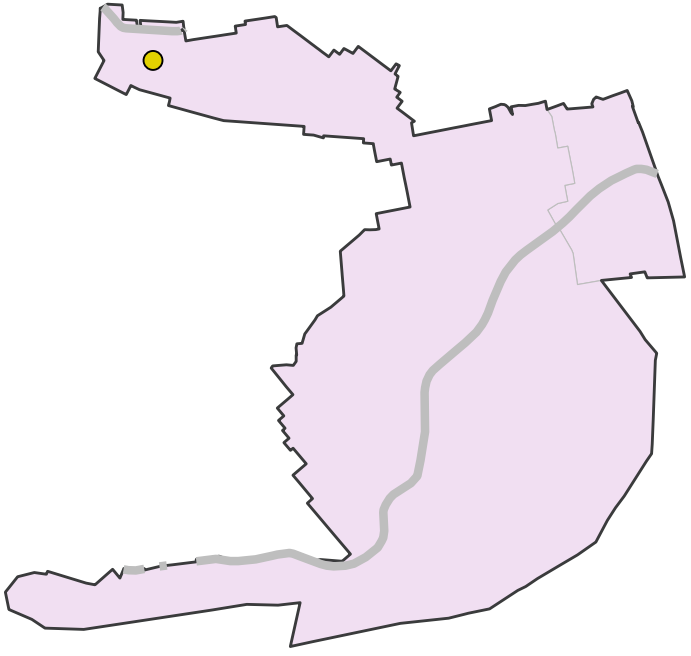
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 8



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

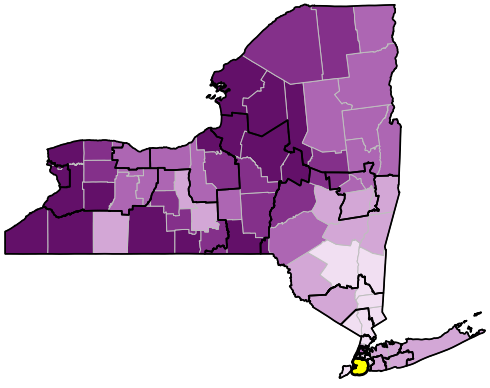
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 8

The map for Congressional District 8 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 40 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There is only 1 stroke center in District 8 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253857

NEW YORK

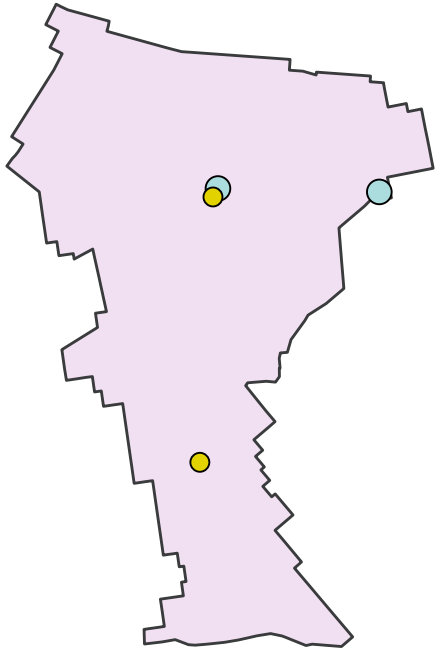
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72
- County*

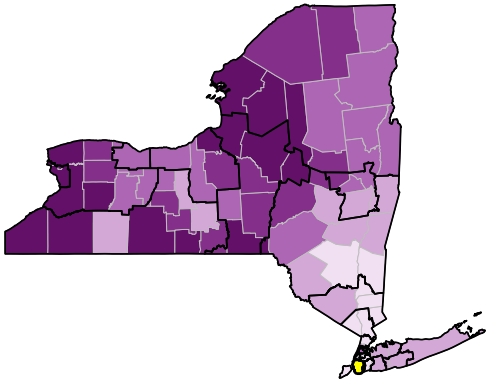
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 9

The map for Congressional District 9 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Kings County, the single county represented in the district, is 39 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 9 (2 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253858

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

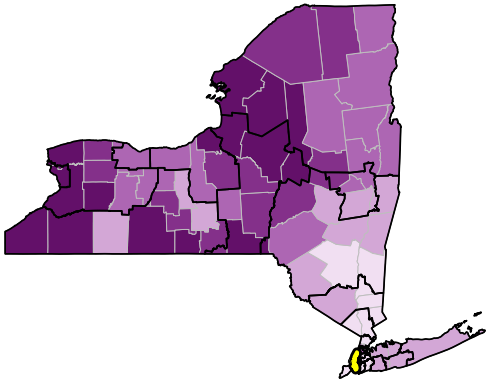
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 10

The map for Congressional District 10 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 36 − 39 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 10 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253859

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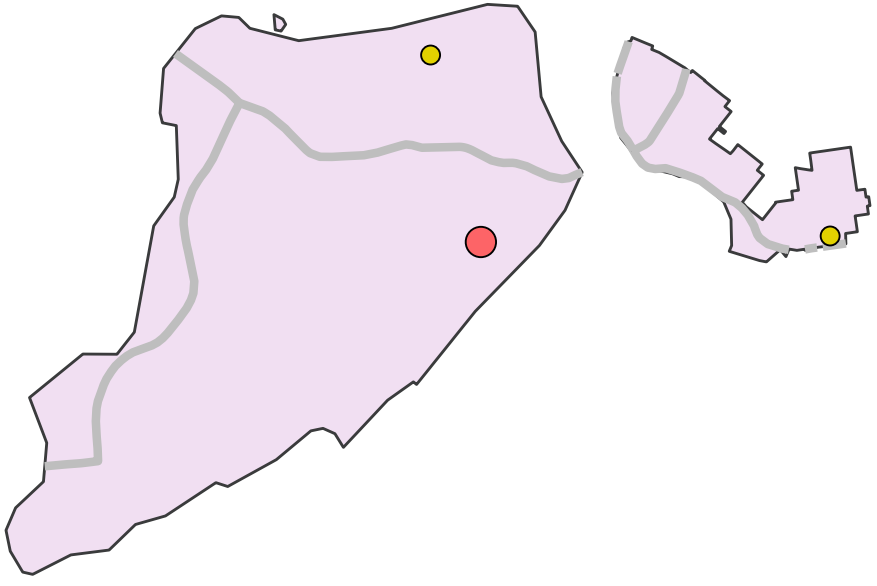
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

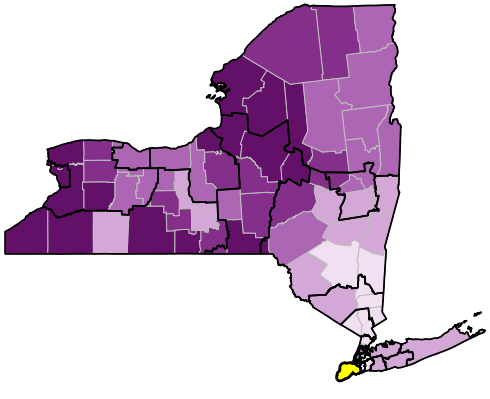
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 11

The map for Congressional District 11 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 38 − 39 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 11 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253860

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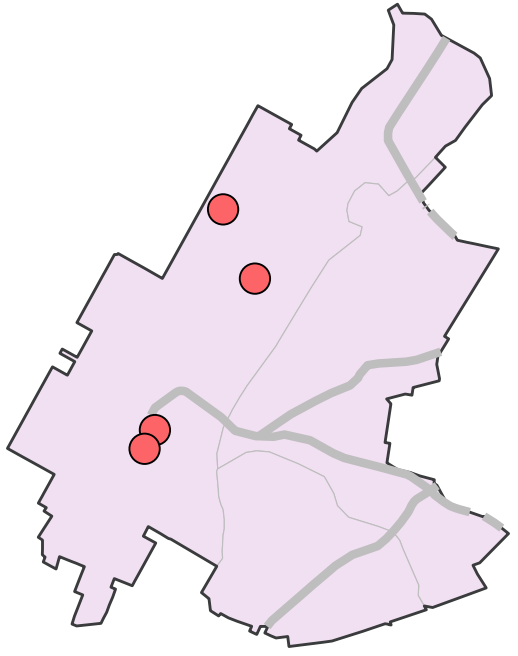
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

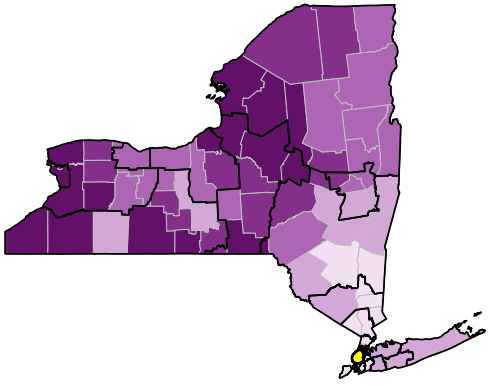
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 12

The map for Congressional District 12 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 36 − 40 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 12 (4 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253861

NEW YORK

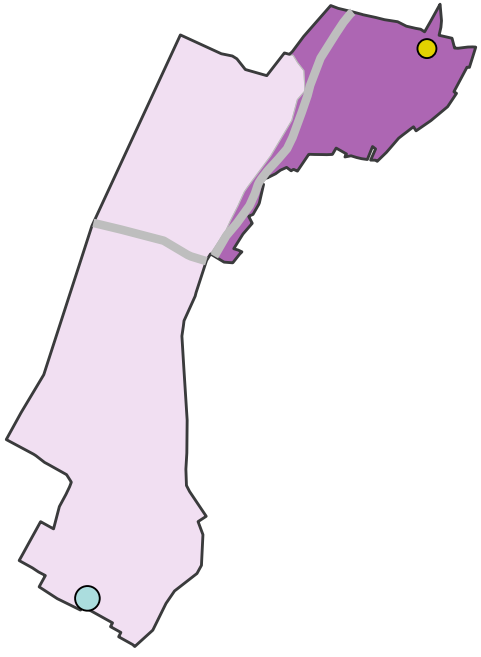
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

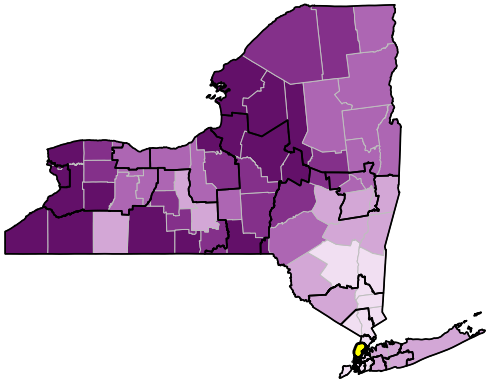
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 13

The map for Congressional District 13 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 36 − 54 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 13 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253862

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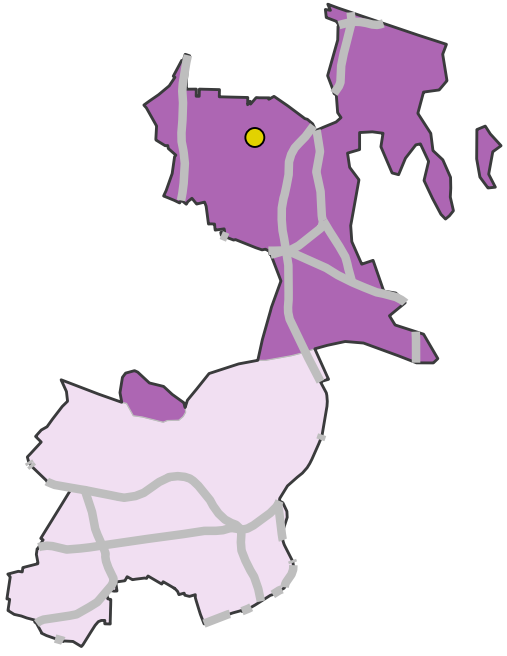
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 14



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

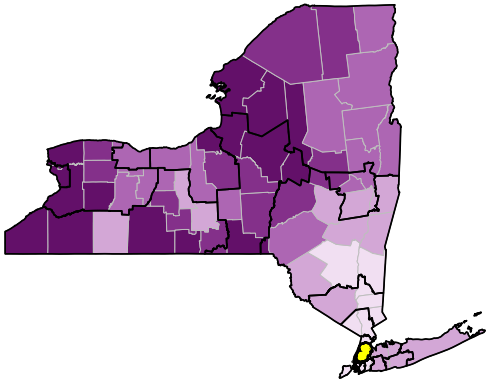
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 14

The map for Congressional District 14 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 40 − 54 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There is only 1 stroke center in District 14 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253863

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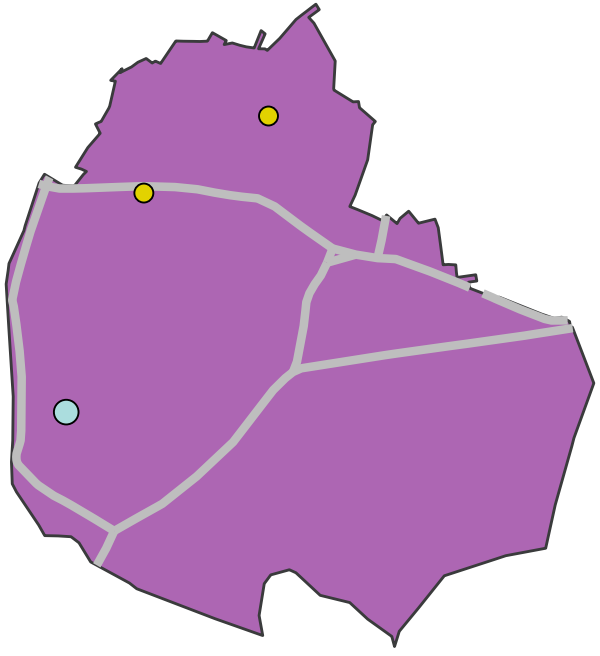
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 15

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

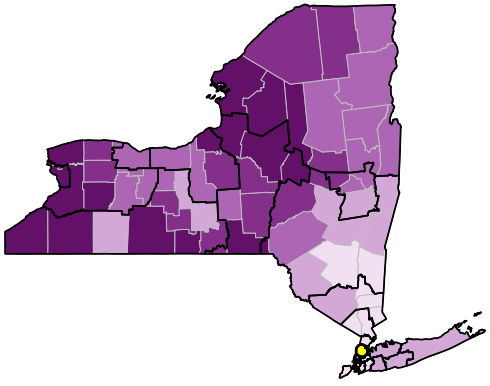
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 15

The map for Congressional District 15 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Bronx County, the single county represented in the district, is 54 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 15 (2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253864

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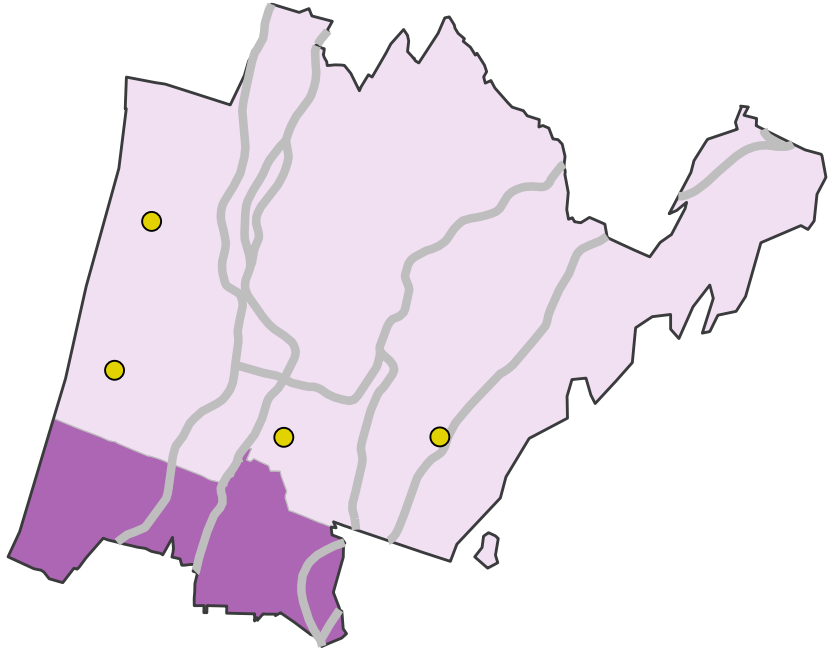
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 16

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

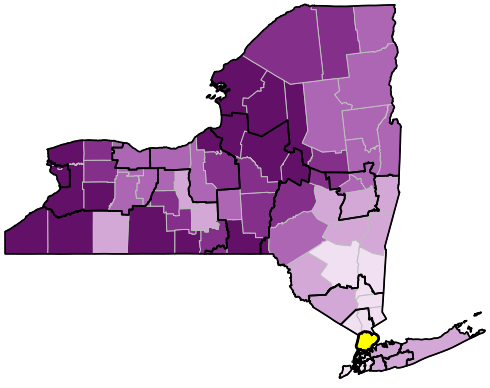
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 16

The map for Congressional District 16 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 54 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 16 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253865

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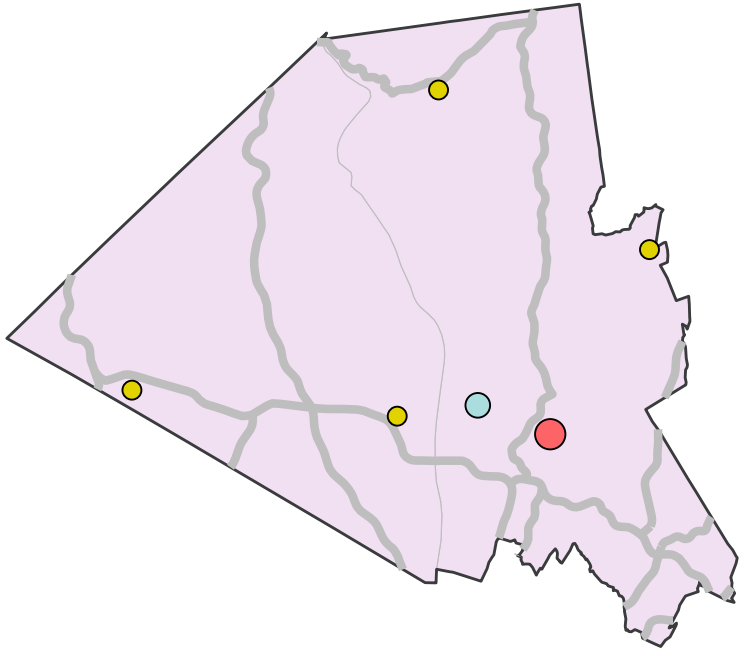
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 17

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

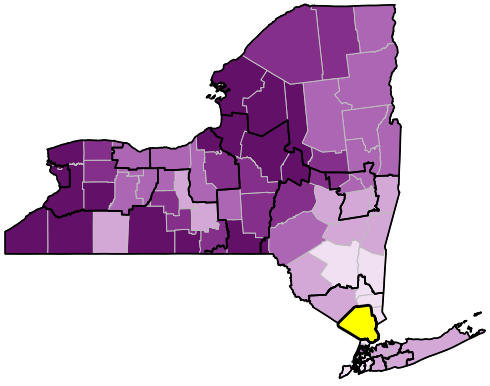
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 17

The map for Congressional District 17 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 41 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 17 (4 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253866

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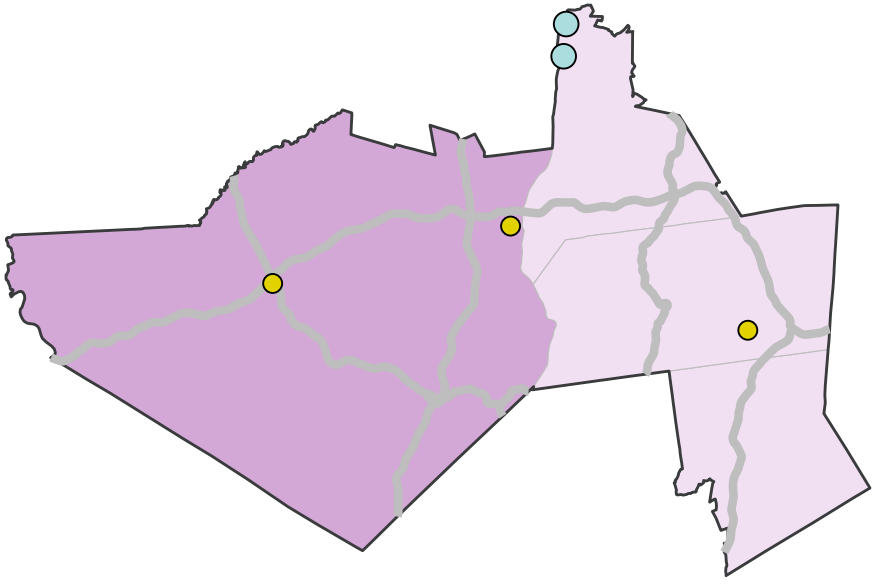
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 18

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

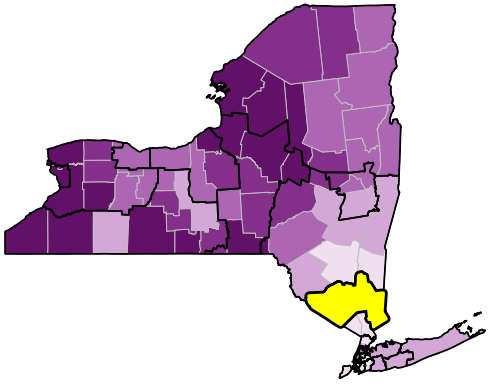
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 18

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 18

The map for Congressional District 18 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 39 − 46 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 18 (3 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253867

NEW YORK

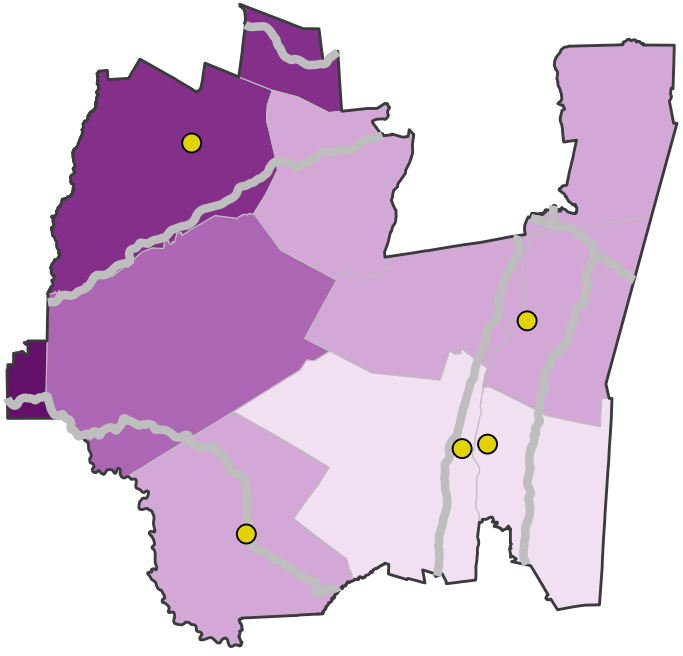
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 19

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

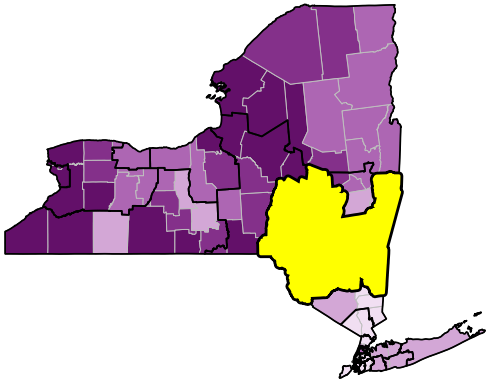
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 19

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 19

The map for Congressional District 19 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 42 − 62 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 19 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253868

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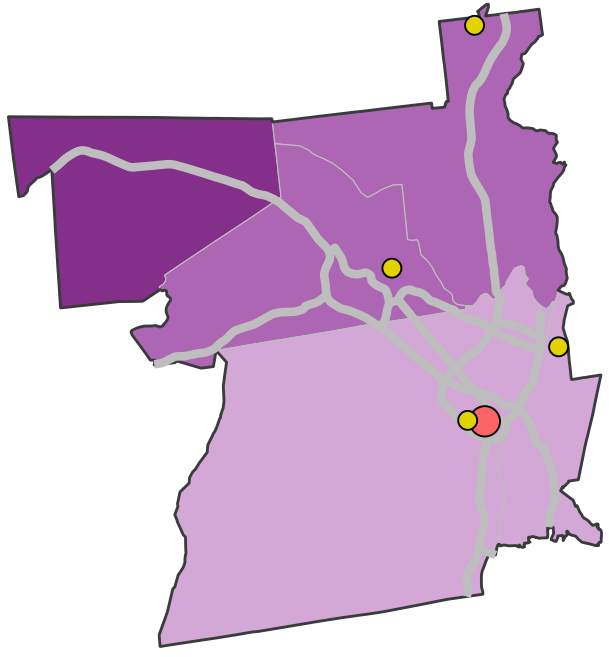
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 20

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

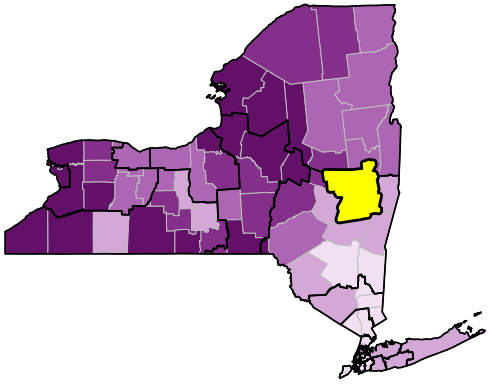
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 20

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 20

The map for Congressional District 20 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 50 − 58 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 20 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253869

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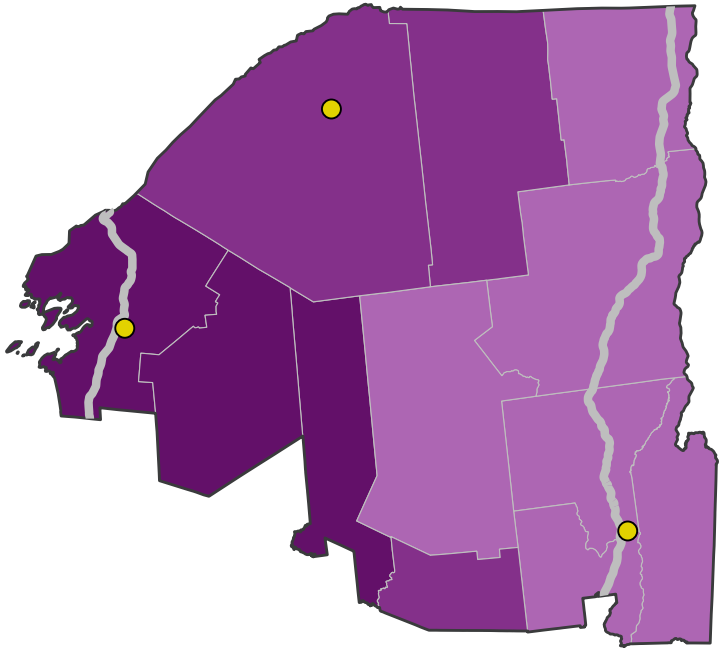
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 21

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

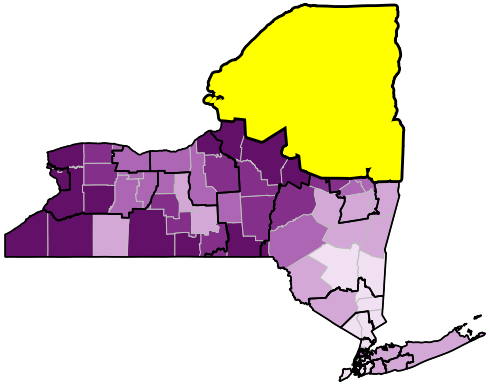
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 21

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 21

The map for Congressional District 21 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 64 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 21 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253870

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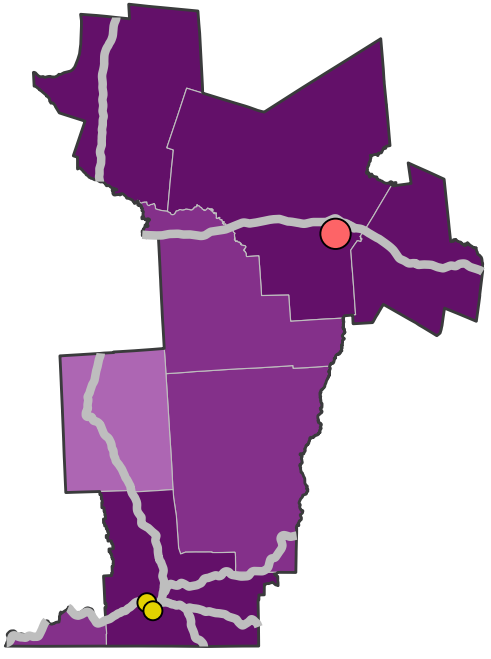
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 22

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

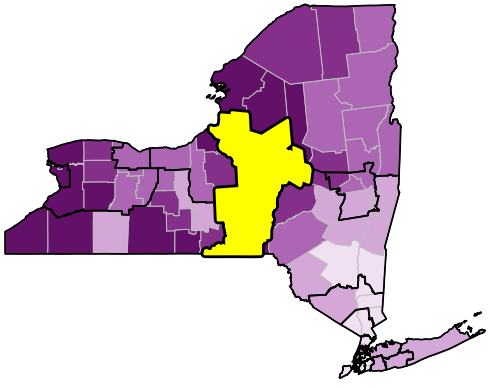
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 22

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 22

The map for Congressional District 22 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 64 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 22 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253871

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 23

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

County*
Highway

Stroke Centers

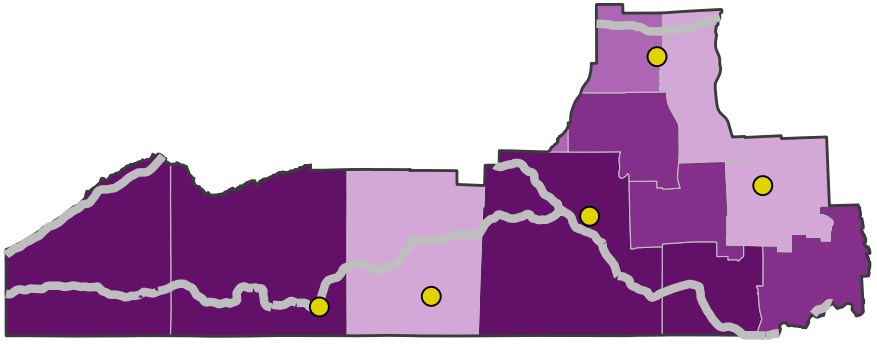
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

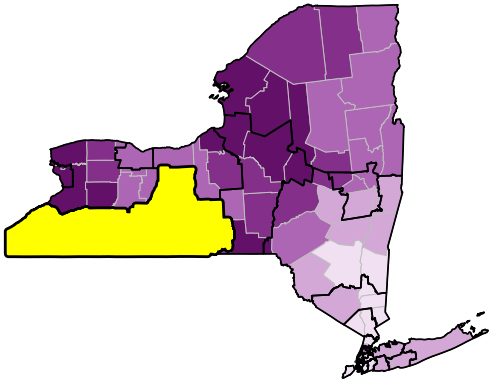
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 23

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 23

The map for Congressional District 23 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 46 − 72 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 23 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253872

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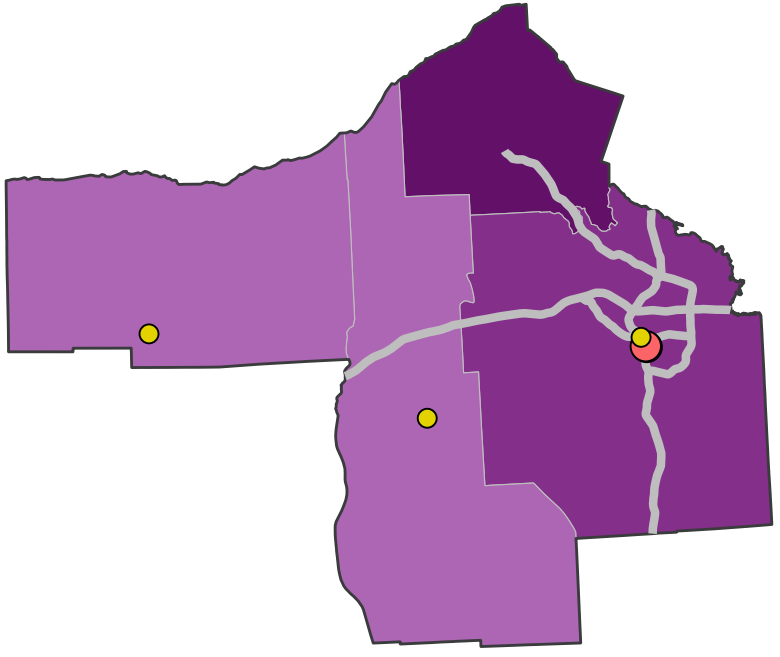
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 24

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

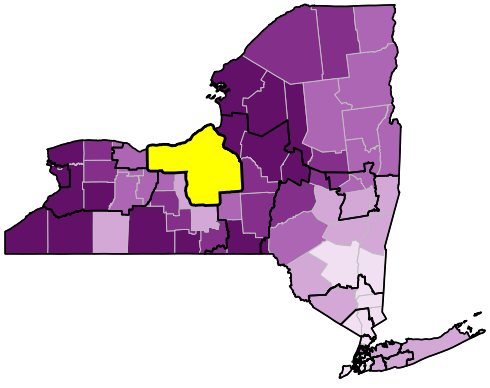
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 24

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 24

The map for Congressional District 24 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 61 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 24 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253873

NEW YORK

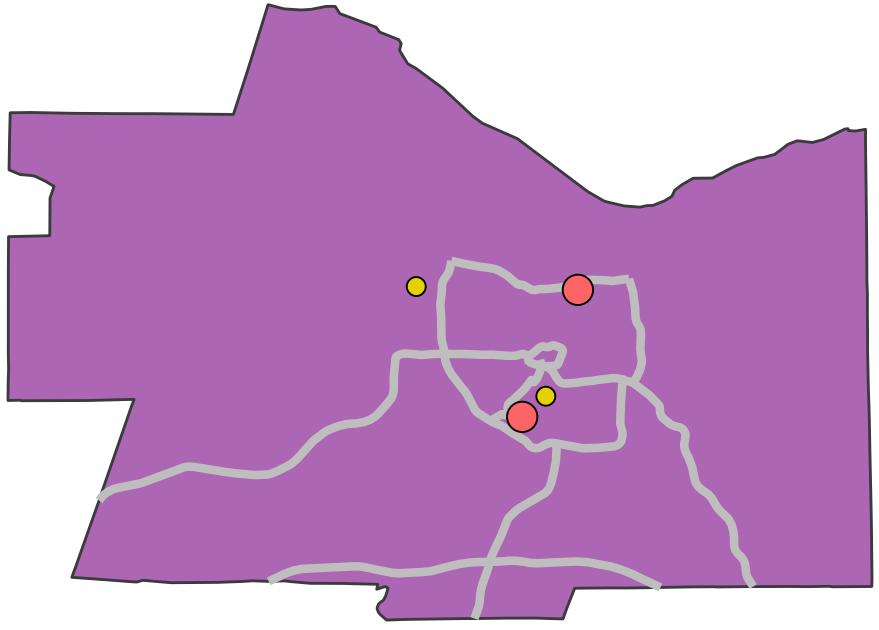
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 25



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

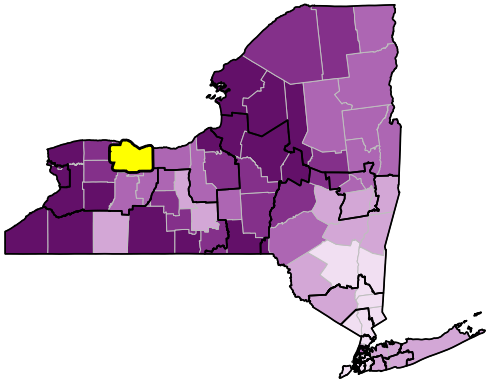
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 25

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 25

The map for Congressional District 25 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for Monroe County, the single county represented in the district, is 54 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 25 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253874

NEW YORK

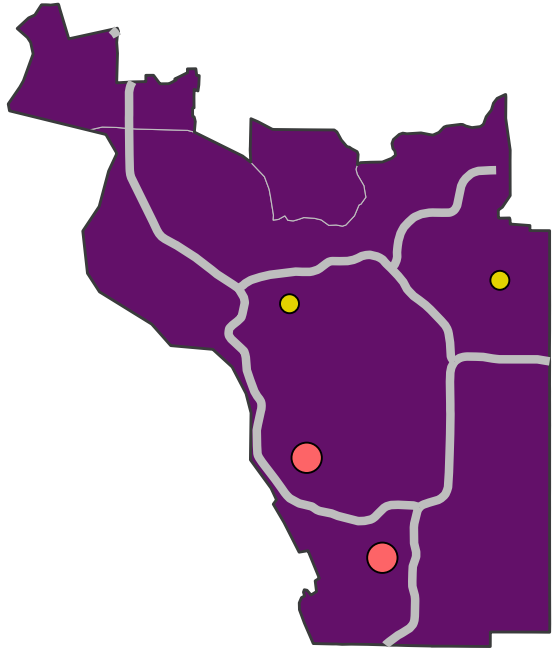
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 26

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 36 − 46
- 46 − 54
- 54 − 58
- 58 − 61
- 61 − 72

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

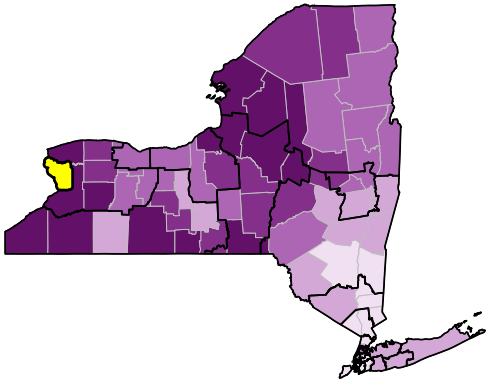
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | New York

54 per 100,000 persons



Congressional District 26

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NEW YORK

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: New York Congressional District 26

The map for Congressional District 26 in New York shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 66 − 66 per 100,000. For New York and the United States, stroke death rates are 54 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 26 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253875

NORTH CAROLINA

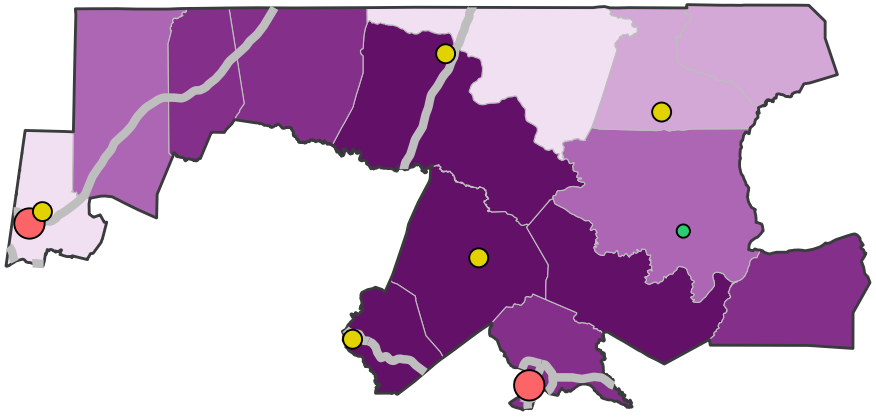
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

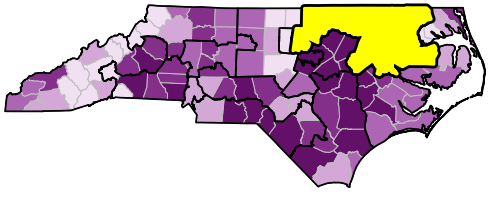
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 1

The map for Congressional District 1 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 138 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 1 (1 Acute, 5 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253876

NORTH CAROLINA

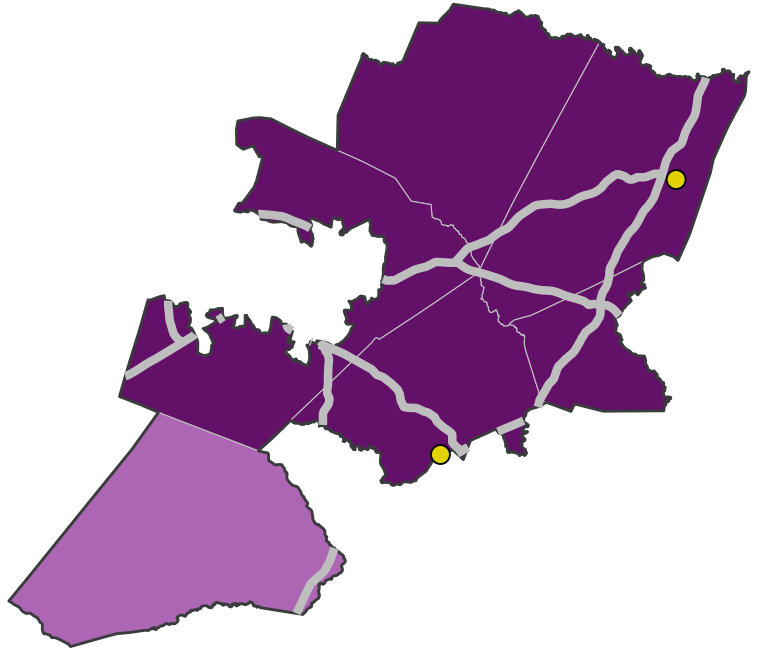
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

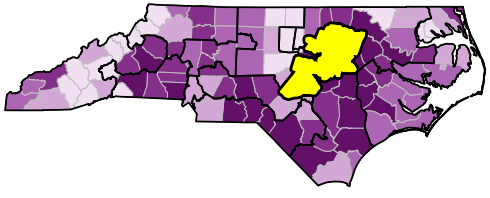
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 2

The map for Congressional District 2 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 93 − 115 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 2 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253877

NORTH CAROLINA

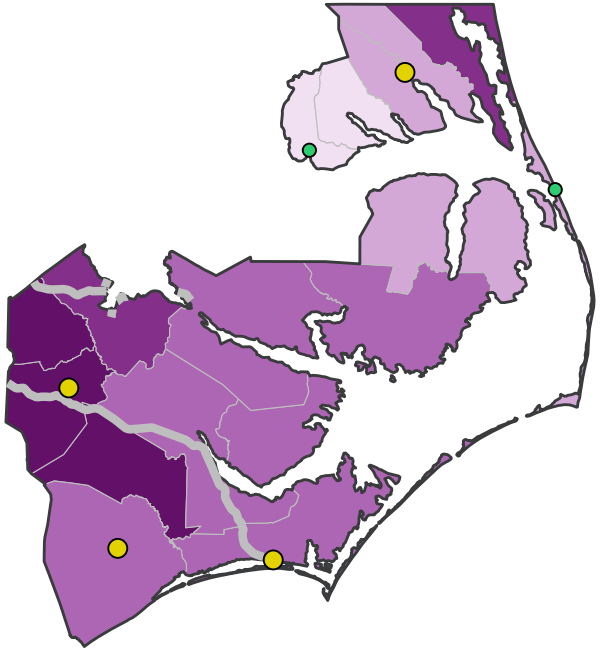
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

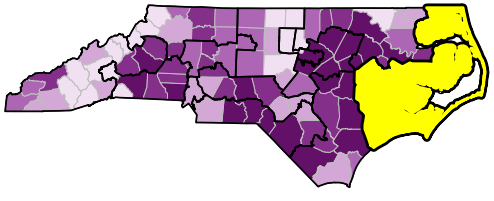
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 3

The map for Congressional District 3 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 113 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (2 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253878

NORTH CAROLINA

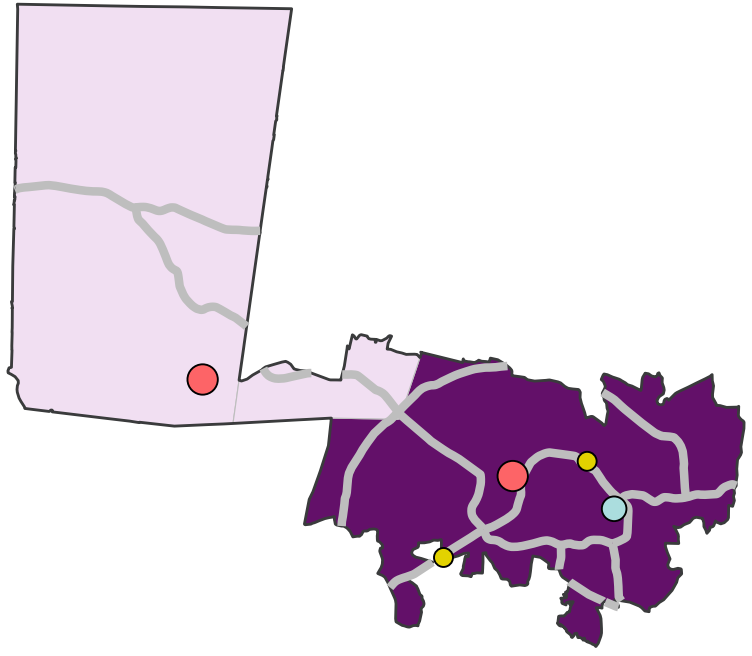
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

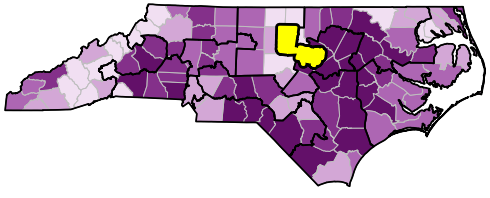
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 4

The map for Congressional District 4 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 113 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (2 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253879

NORTH CAROLINA

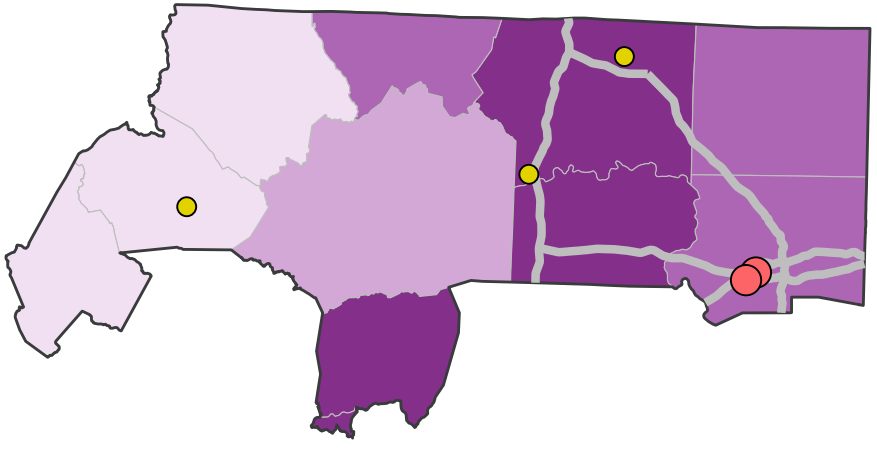
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

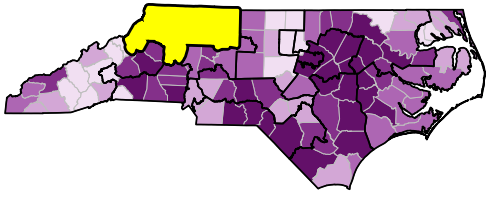
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 5

The map for Congressional District 5 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 99 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253880

NORTH CAROLINA

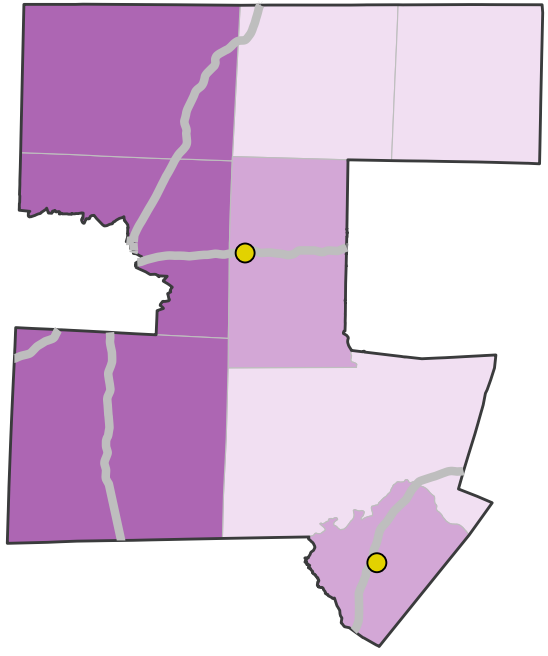
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 6



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

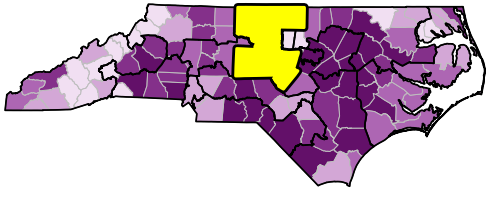
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 6

The map for Congressional District 6 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 90 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 6 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253881

NORTH CAROLINA

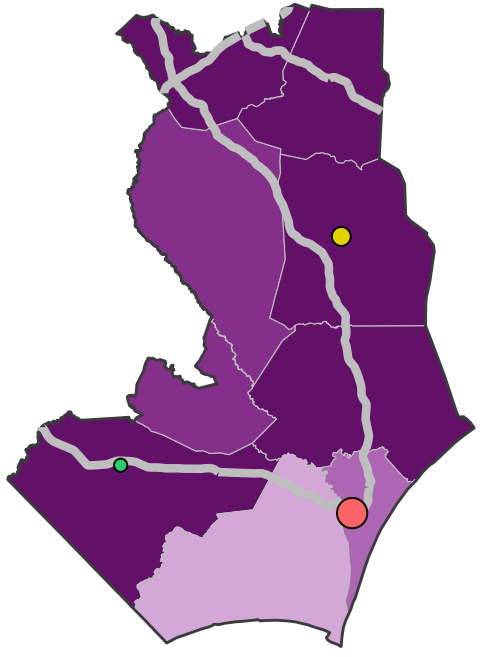
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

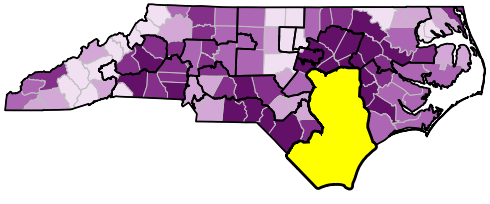
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 7

The map for Congressional District 7 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 79 − 116 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 7 (1 Acute, 1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253882

NORTH CAROLINA

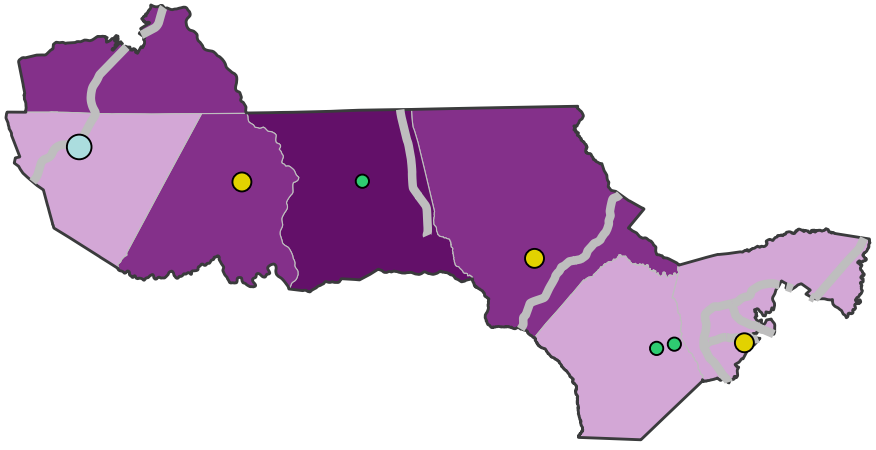
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

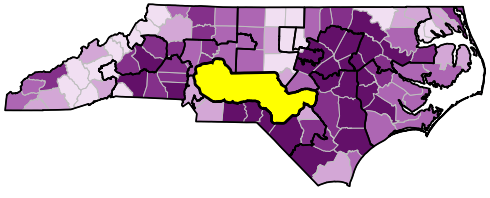
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 8

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 8

The map for Congressional District 8 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 101 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 8 (3 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253883

NORTH CAROLINA

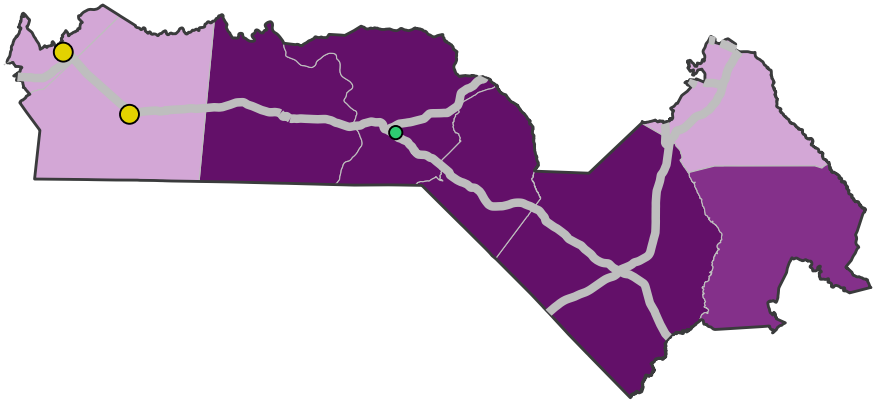
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

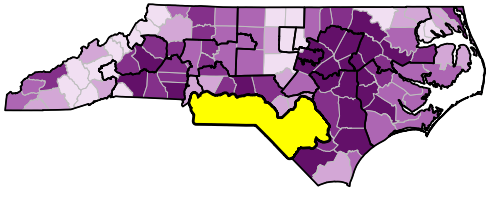
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 9

The map for Congressional District 9 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 196 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 9 (1 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253884

NORTH CAROLINA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

County*
Highway

Stroke Centers

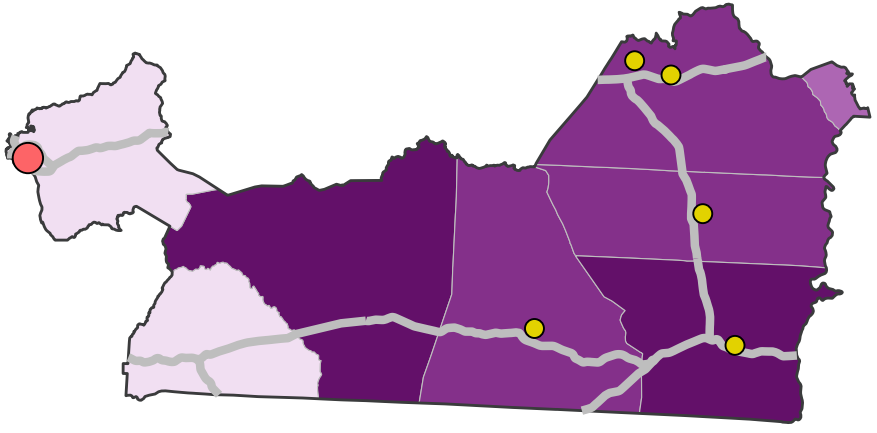
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

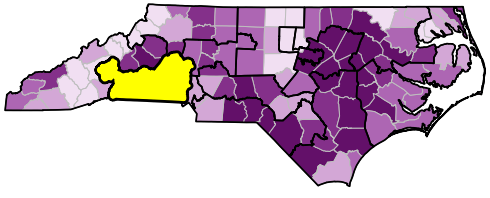
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 10

The map for Congressional District 10 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 121 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 10 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253885

NORTH CAROLINA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

Stroke Centers

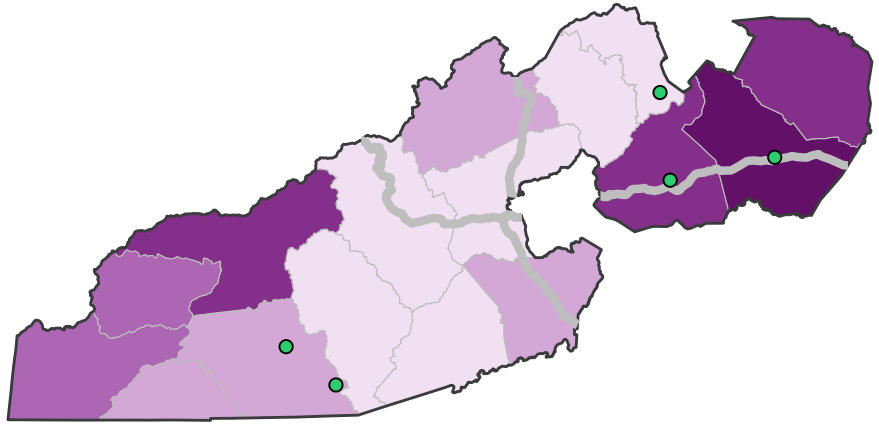
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

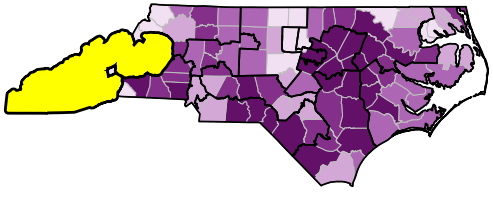
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 11

The map for Congressional District 11 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 61 − 103 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 11 (5 Acute).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253886

NORTH CAROLINA

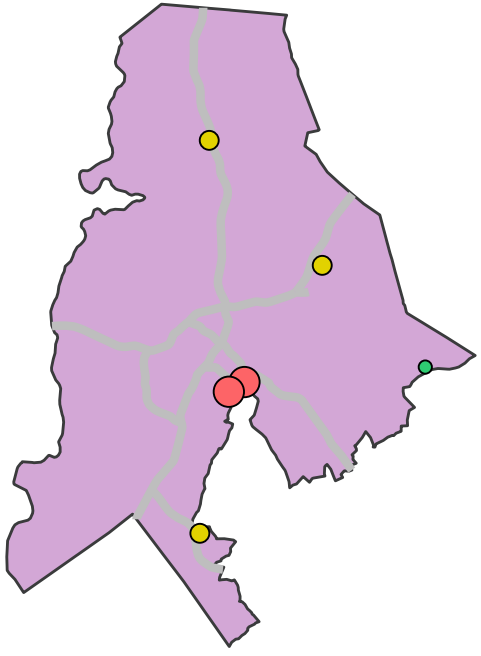
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

- County*
- Highway

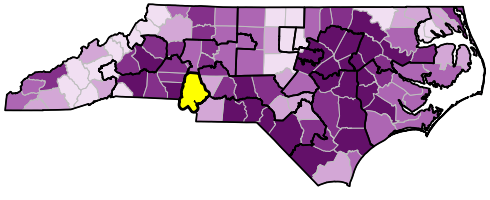
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 12

The map for Congressional District 12 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for Mecklenburg County, the single county represented in the district, is 80 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 12 (1 Acute, 3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253887

NORTH CAROLINA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196

County*
Highway

Stroke Centers

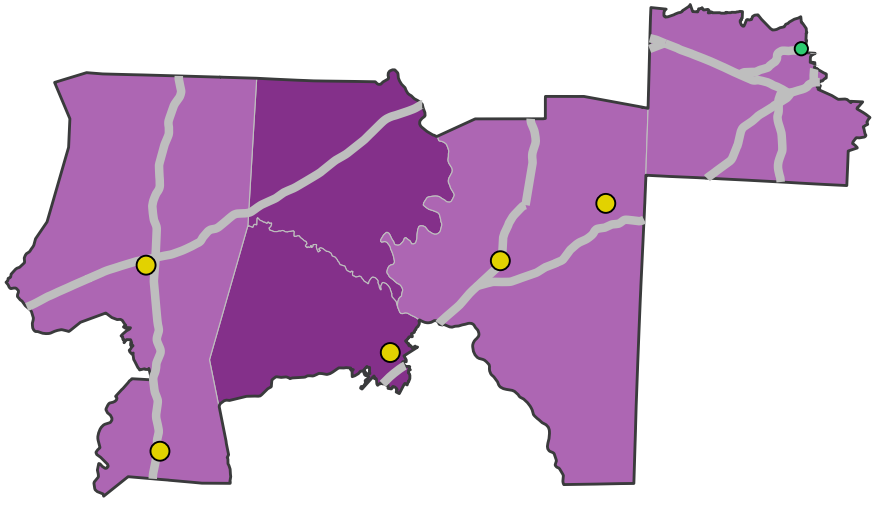
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

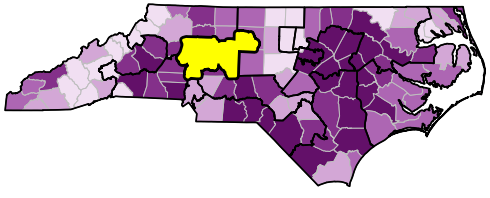
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 13

The map for Congressional District 13 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 89 − 94 per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 13 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253888

NORTH CAROLINA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 55 − 79
- 79 − 88
- 88 − 94
- 94 − 101
- 101 − 196
- County*

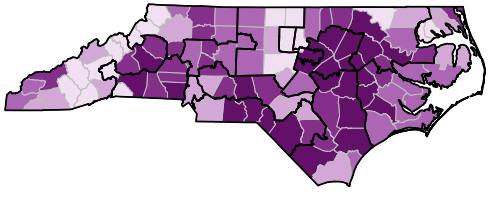
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | North Carolina

93 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Carolina Congressional District 14

The map for Congressional District 14 in North Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For North Carolina and the United States, stroke death rates are 93 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 14 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253889

NORTH DAKOTA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 28 − 53
- 53 − 57
- 57 − 59
- 59 − 67
- 67 − 89
- Insufficient Data
- County*
- Highway

Stroke Centers

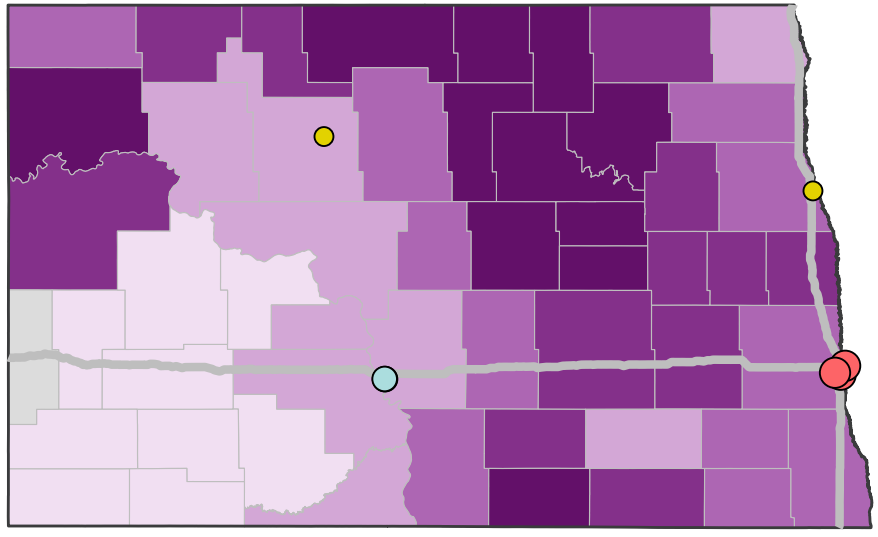
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | North Dakota

60 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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NORTH DAKOTA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: North Dakota Congressional District 1

The map for Congressional District 1 in North Dakota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 28 − 89 per 100,000. For North Dakota and the United States, stroke death rates are 60 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 1 (2 Primary, 2 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253890

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

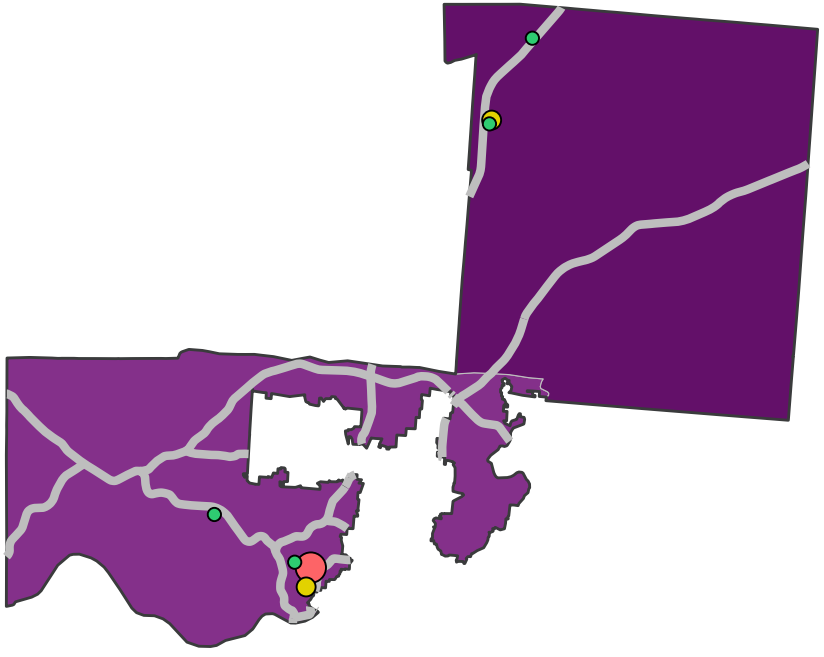
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

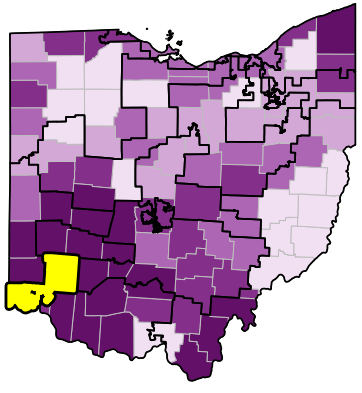
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 1

The map for Congressional District 1 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 102 − 130 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 1 (4 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253891

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

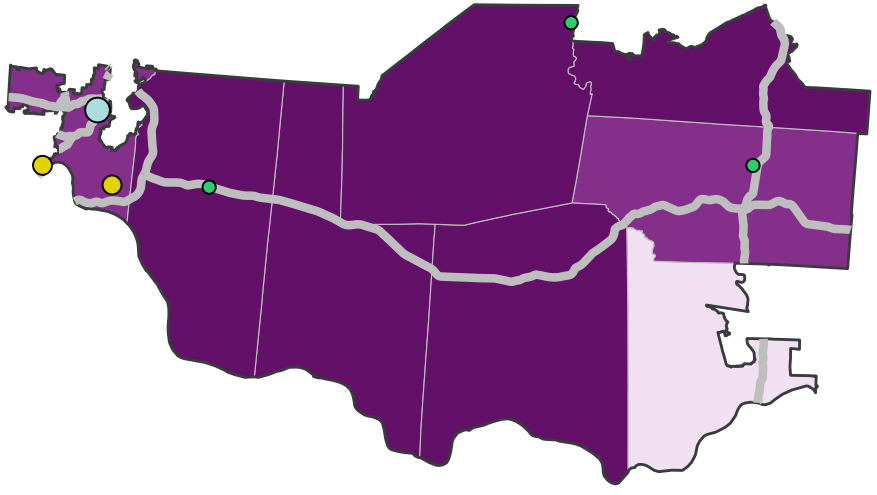
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

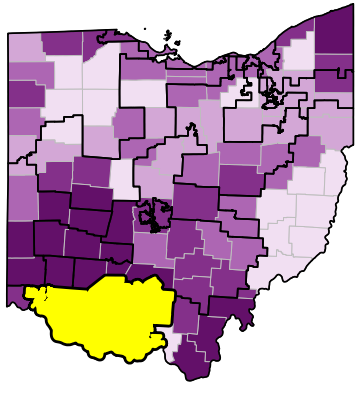
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 2

The map for Congressional District 2 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 112 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (3 Acute, 2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253892

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

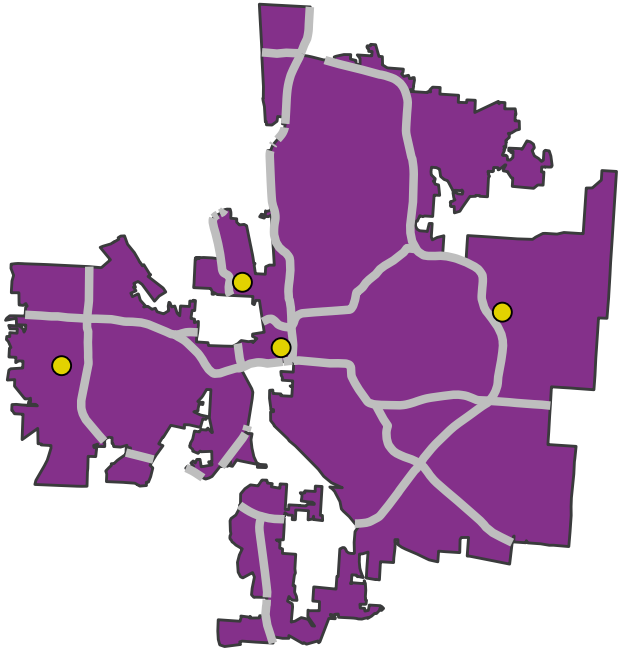
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

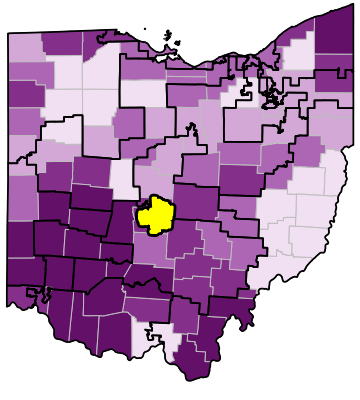
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 3

The map for Congressional District 3 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for Franklin County, the single county represented in the district, is 88 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253893

OHIO

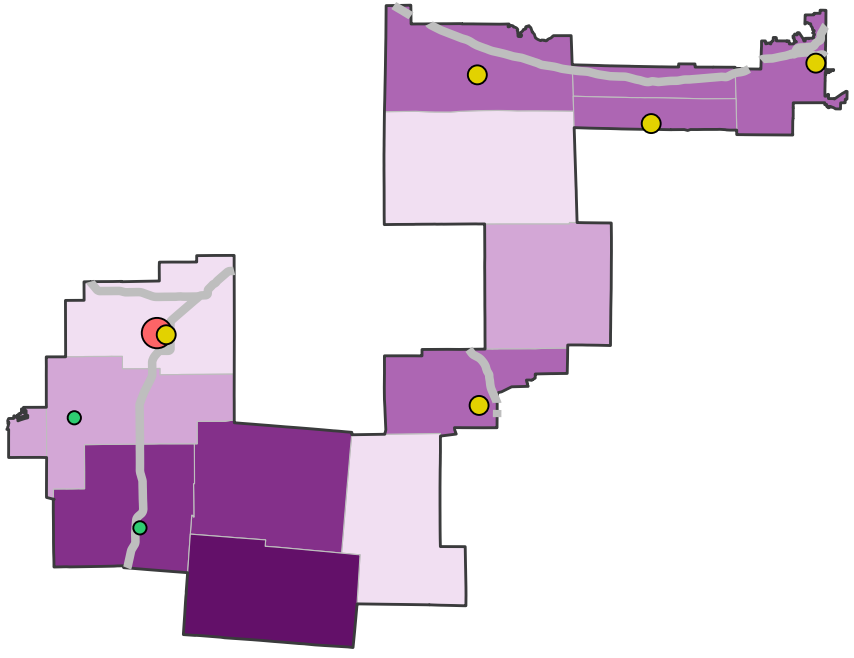
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

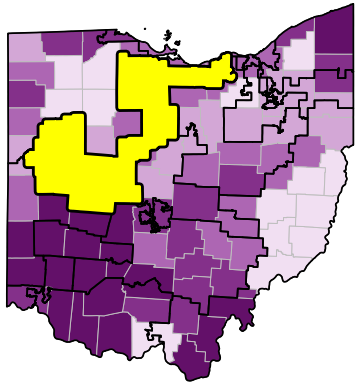
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 4

The map for Congressional District 4 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 140 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 4 (2 Acute, 5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253894

OHIO

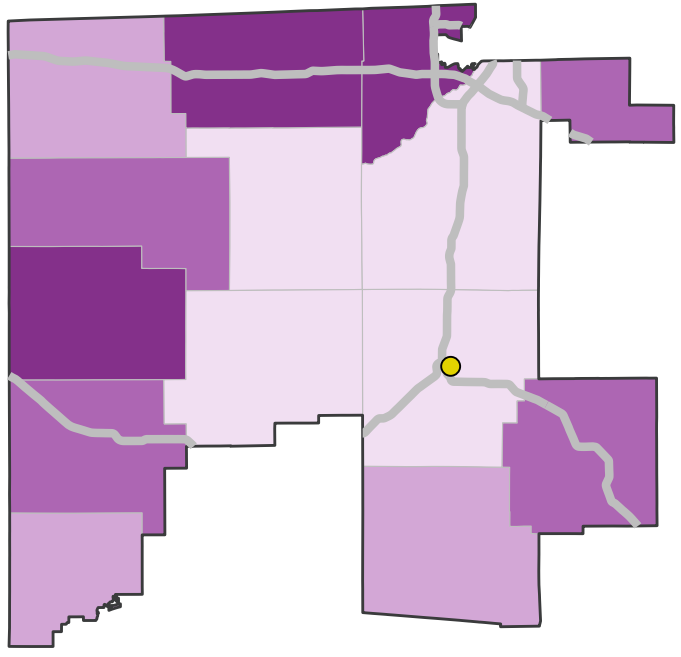
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

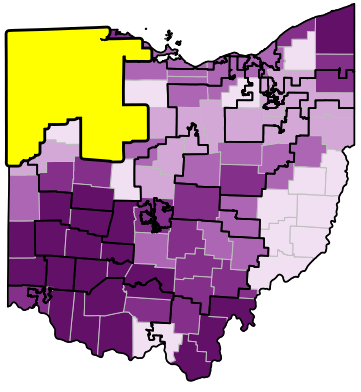
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 5

The map for Congressional District 5 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 100 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There is only 1 stroke center in District 5 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253895

OHIO

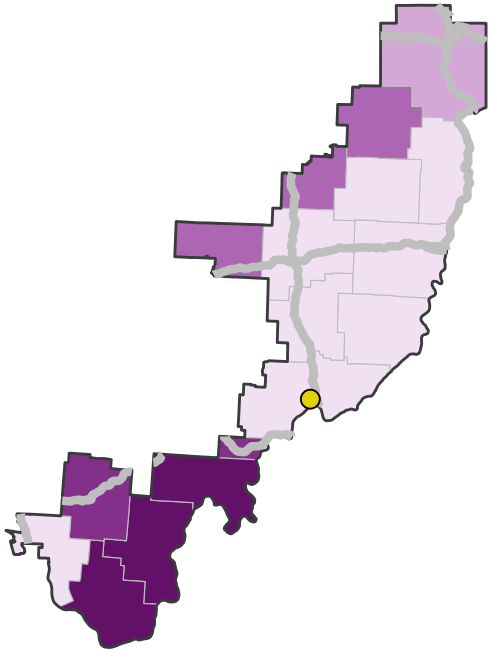
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

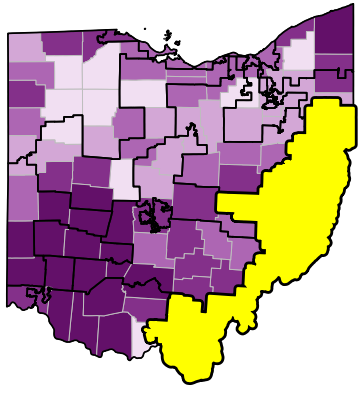
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 6

The map for Congressional District 6 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 126 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There is only 1 stroke center in District 6 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253896

OHIO

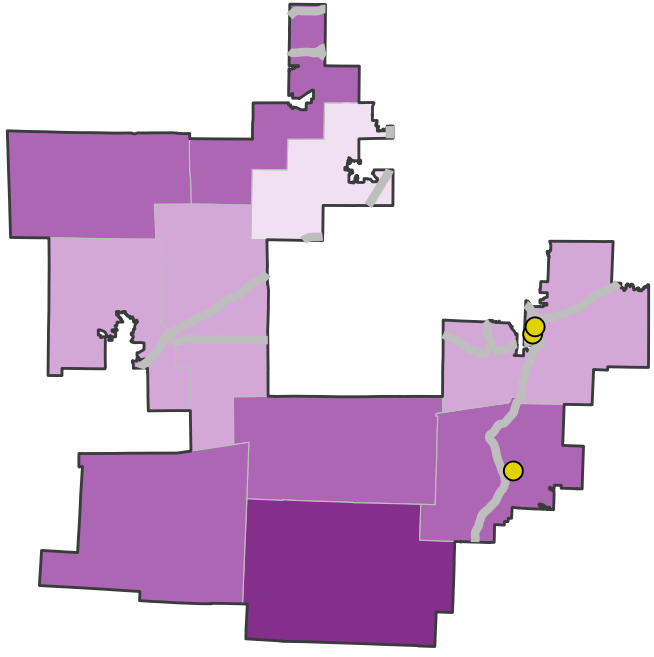
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

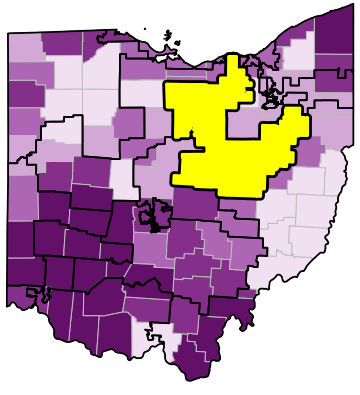
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 7

The map for Congressional District 7 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 87 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 7 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253897

OHIO

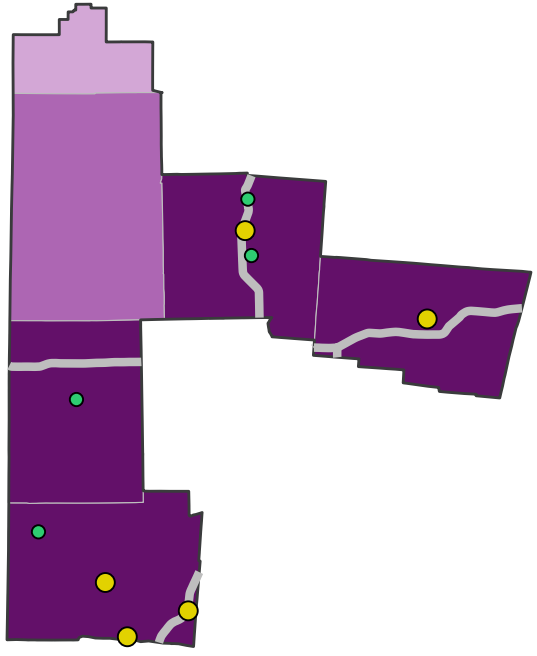
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

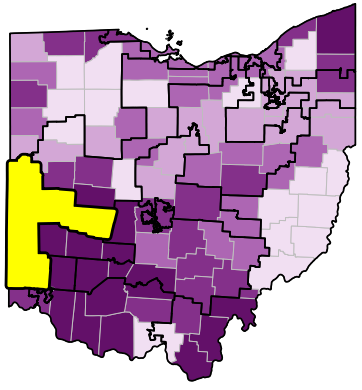
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 8

The map for Congressional District 8 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 162 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 8 (4 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253898

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

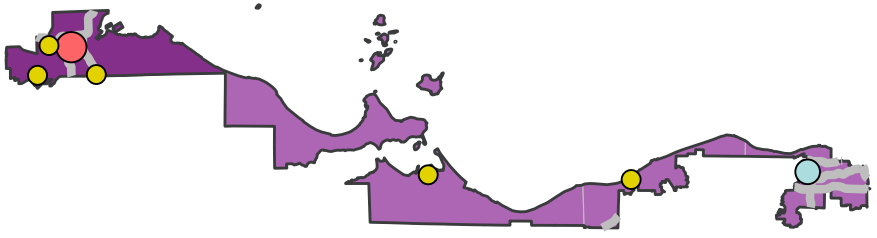
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

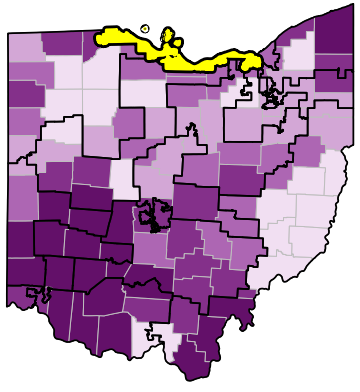
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 9

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 9

The map for Congressional District 9 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 100 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 9 (5 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253899

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

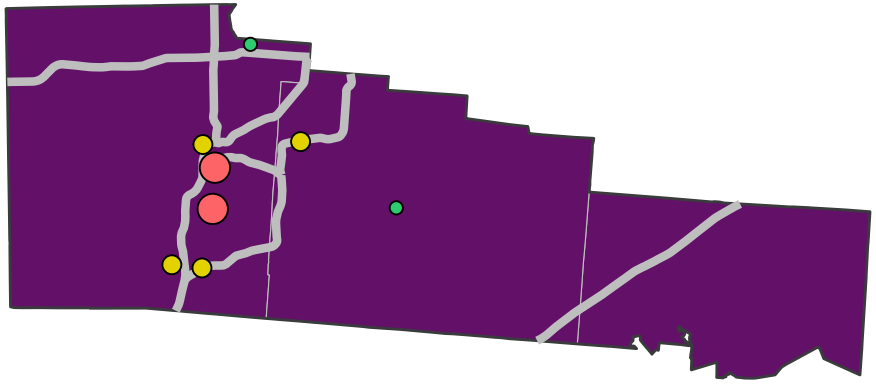
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

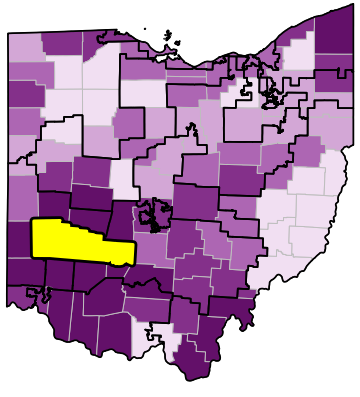
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 10

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 10

The map for Congressional District 10 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 129 − 148 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 10 (2 Acute, 4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253900

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

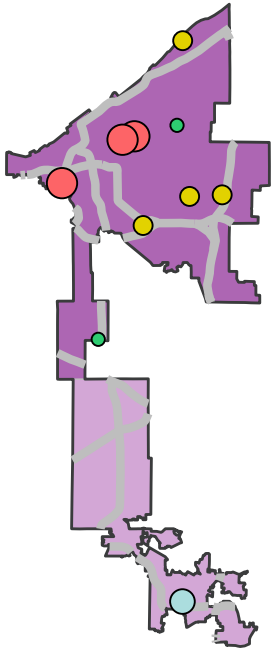
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

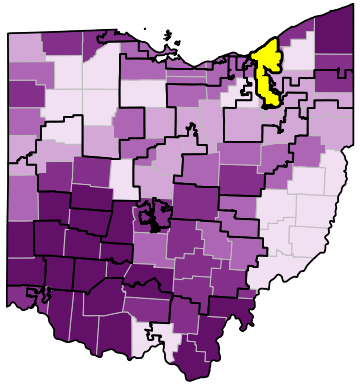
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 11

The map for Congressional District 11 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 80 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 11 (2 Acute, 4 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253901

OHIO

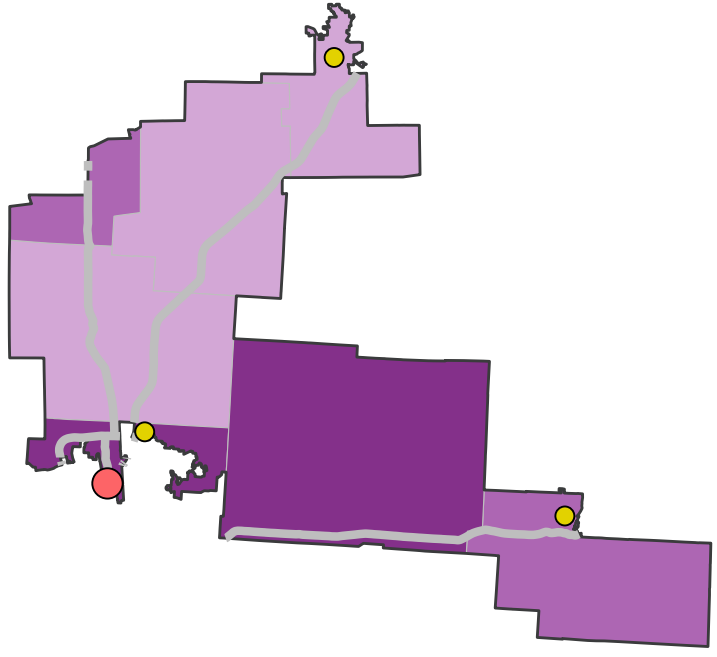
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 12



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

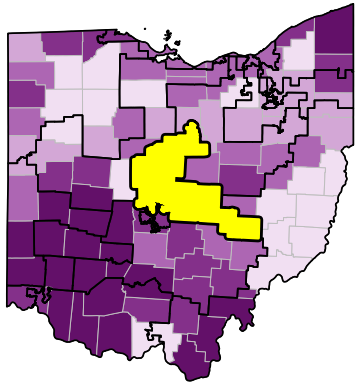
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 12

The map for Congressional District 12 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 88 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 12 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253902

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

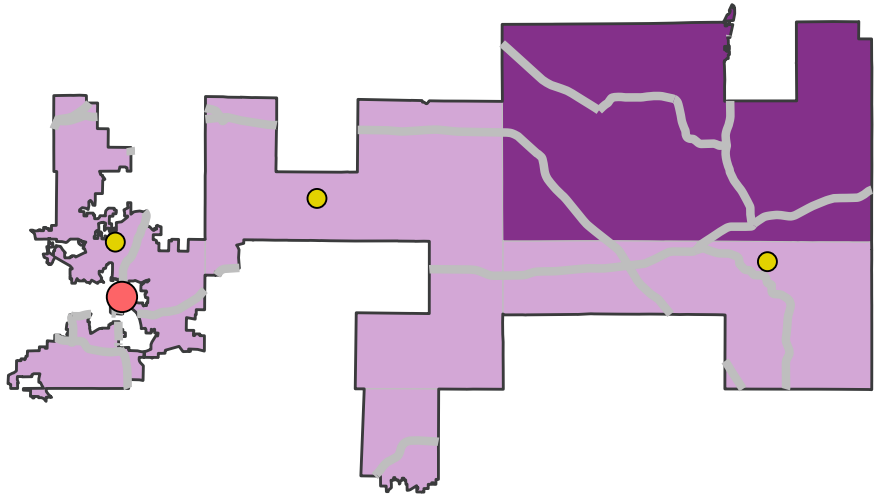
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

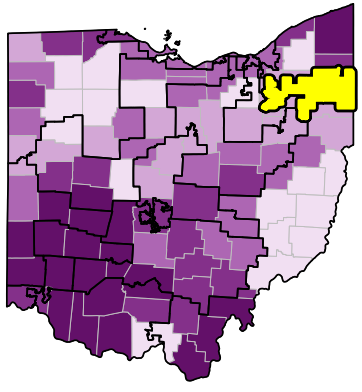
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 13

The map for Congressional District 13 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 90 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 13 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253903

OHIO

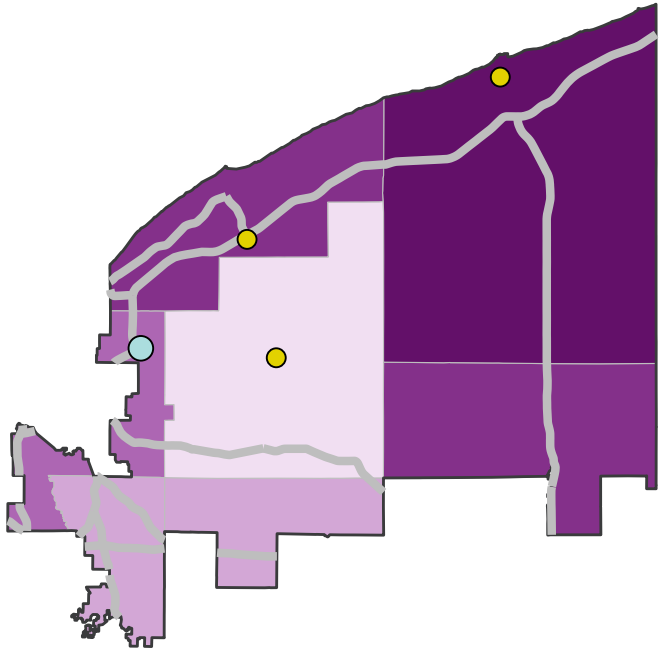
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

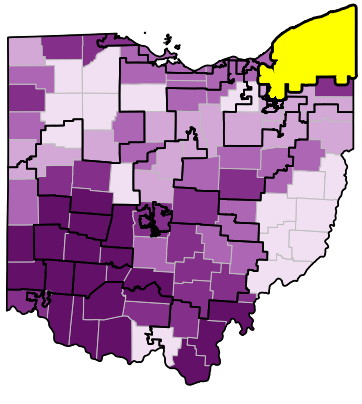
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 14

The map for Congressional District 14 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 109 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 14 (3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253904

OHIO

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 15

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 56 − 77
- 77 − 80
- 80 − 85
- 85 − 107
- 107 − 162

- County*
- Highway

Stroke Centers

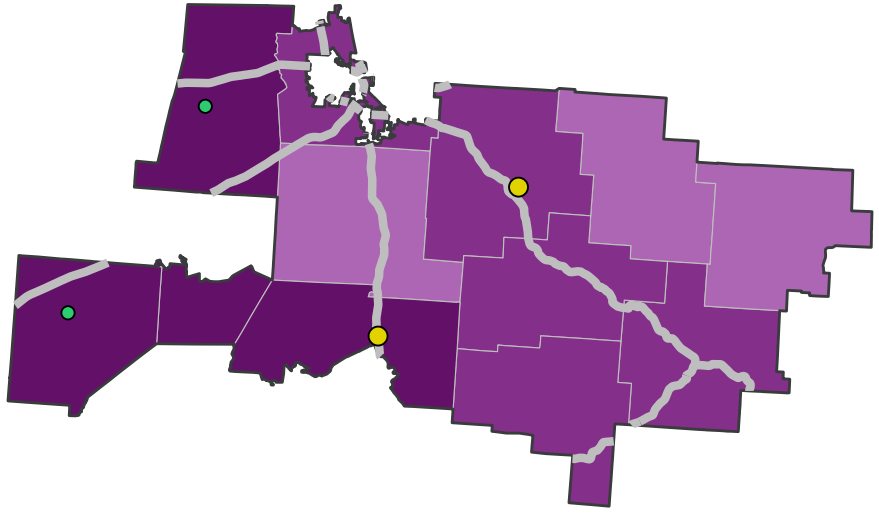
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

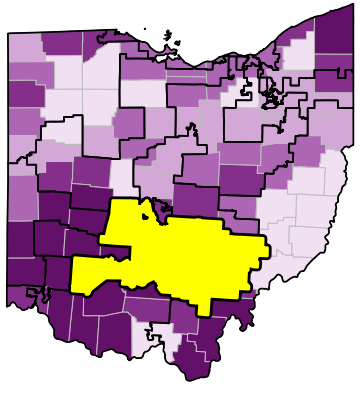
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Ohio

90 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OHIO

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Ohio Congressional District 15

The map for Congressional District 15 in Ohio shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 129 per 100,000. For Ohio and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 15 (2 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253905

OKLAHOMA

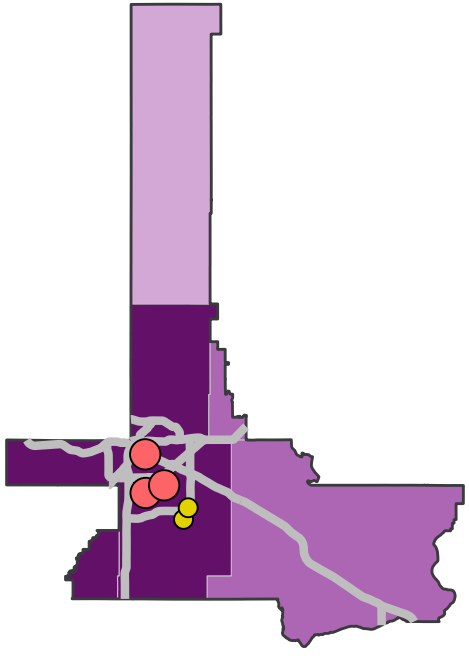
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 64
- 64 − 76
- 76 − 81
- 81 − 87
- 87 − 104

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

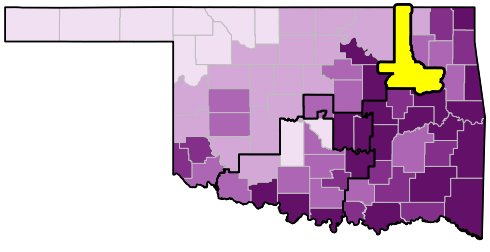
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oklahoma

77 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OKLAHOMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oklahoma Congressional District 1

The map for Congressional District 1 in Oklahoma shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 89 per 100,000. For Oklahoma and the United States, stroke death rates are 77 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (2 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253906

OKLAHOMA

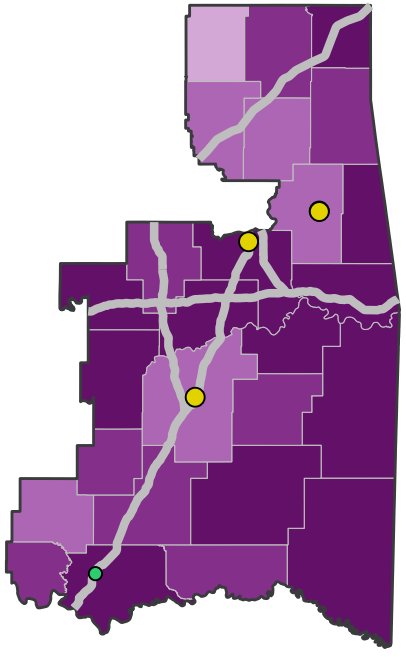
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 64
- 64 − 76
- 76 − 81
- 81 − 87
- 87 − 104

- County*
- Highway

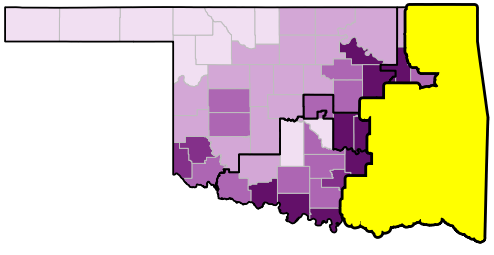
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oklahoma

77 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oklahoma Congressional District 2

The map for Congressional District 2 in Oklahoma shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 104 per 100,000. For Oklahoma and the United States, stroke death rates are 77 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253907

OKLAHOMA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 64
- 64 − 76
- 76 − 81
- 81 − 87
- 87 − 104

County*
Highway

Stroke Centers

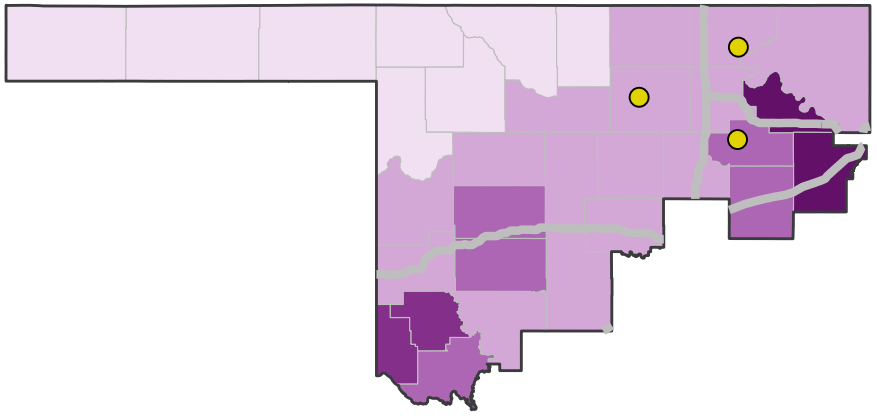
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

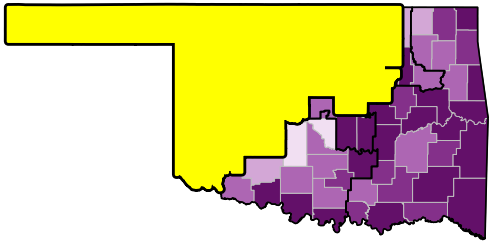
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Oklahoma

77 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

OKLAHOMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oklahoma Congressional District 3

The map for Congressional District 3 in Oklahoma shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 89 per 100,000. For Oklahoma and the United States, stroke death rates are 77 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 3 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253908

OKLAHOMA

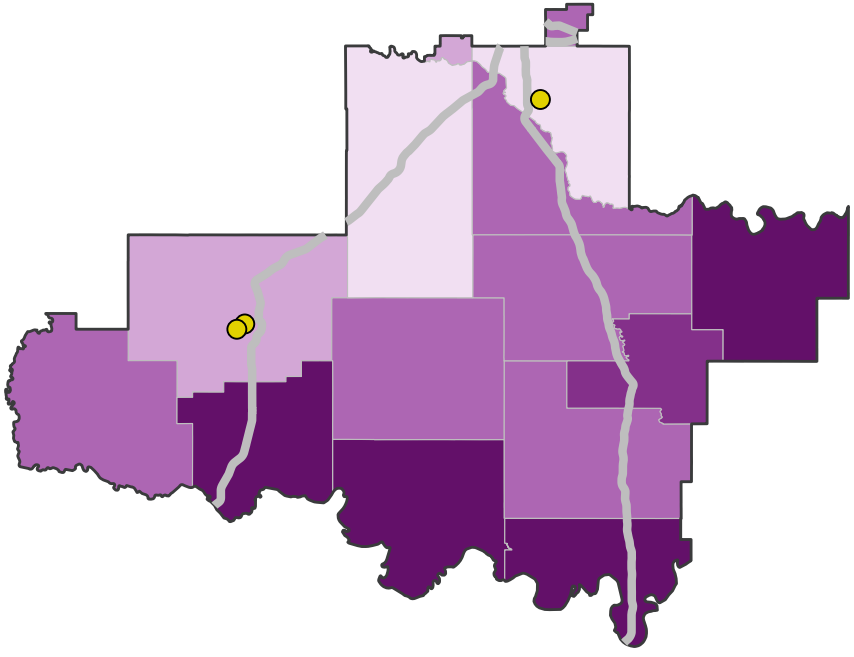
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 64
- 64 − 76
- 76 − 81
- 81 − 87
- 87 − 104

- County*
- Highway

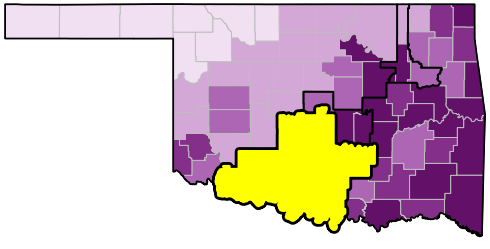
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oklahoma

77 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OKLAHOMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oklahoma Congressional District 4

The map for Congressional District 4 in Oklahoma shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 90 per 100,000. For Oklahoma and the United States, stroke death rates are 77 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253909

OKLAHOMA

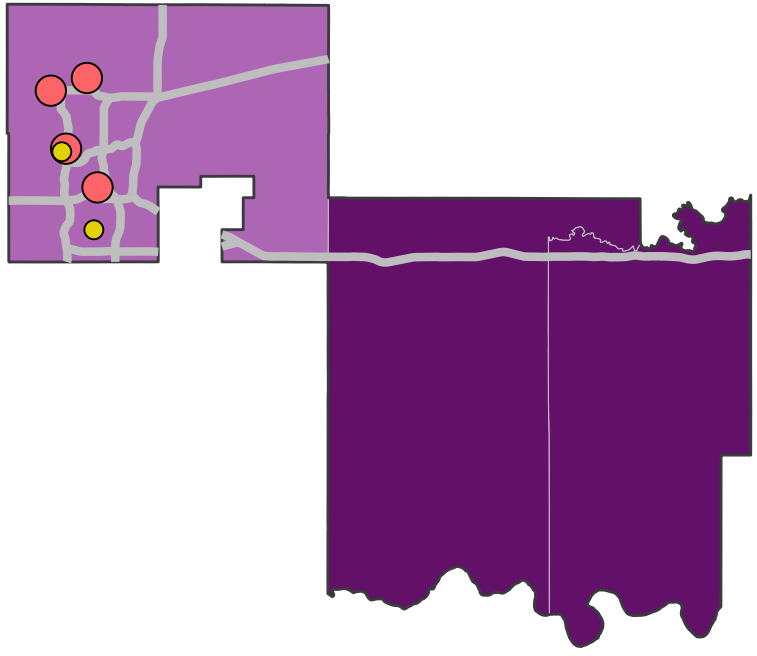
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 5



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 64
- 64 − 76
- 76 − 81
- 81 − 87
- 87 − 104

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

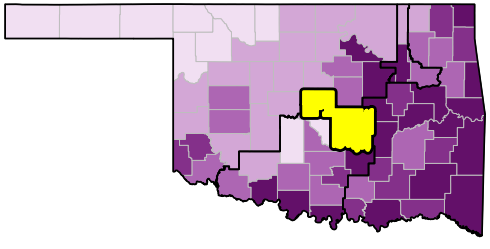
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oklahoma

77 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

OKLAHOMA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oklahoma Congressional District 5

The map for Congressional District 5 in Oklahoma shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 90 per 100,000. For Oklahoma and the United States, stroke death rates are 77 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 5 (2 Primary, 4 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253910

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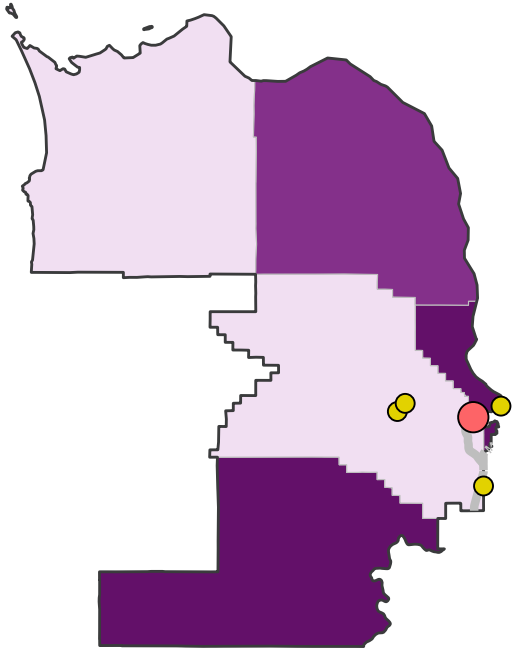
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

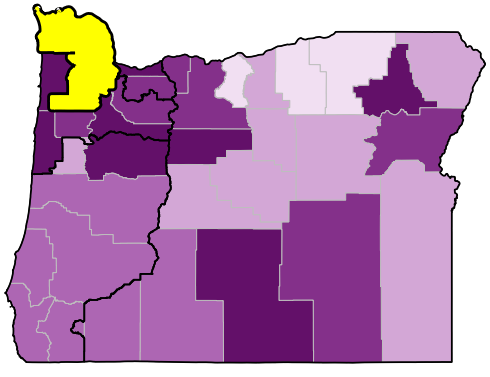
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 1

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FOR MORE MAPS

OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 1

The map for Congressional District 1 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 75 − 97 per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253911

OREGON

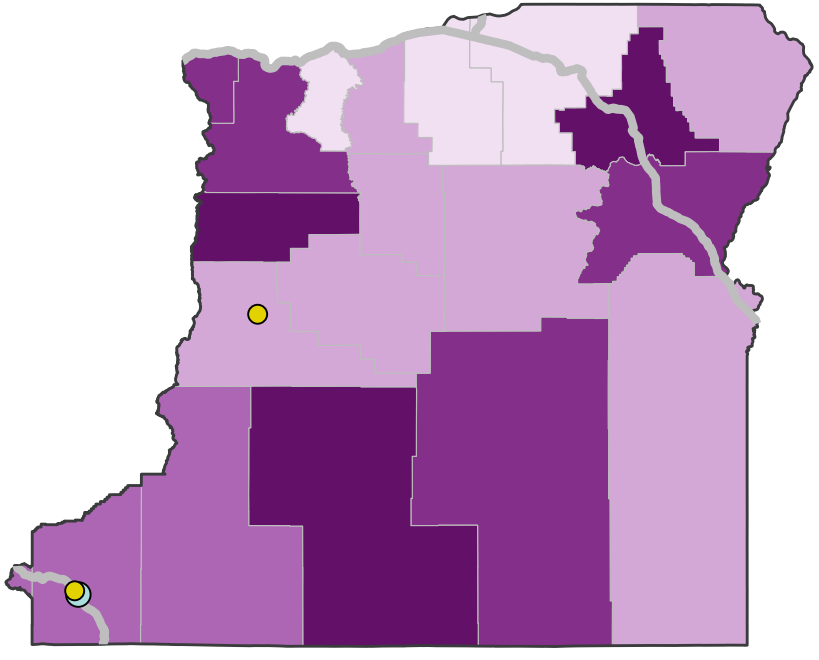
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

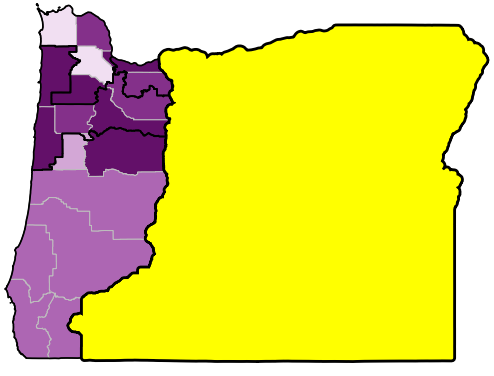
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 2

The map for Congressional District 2 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 95 per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253912

OREGON

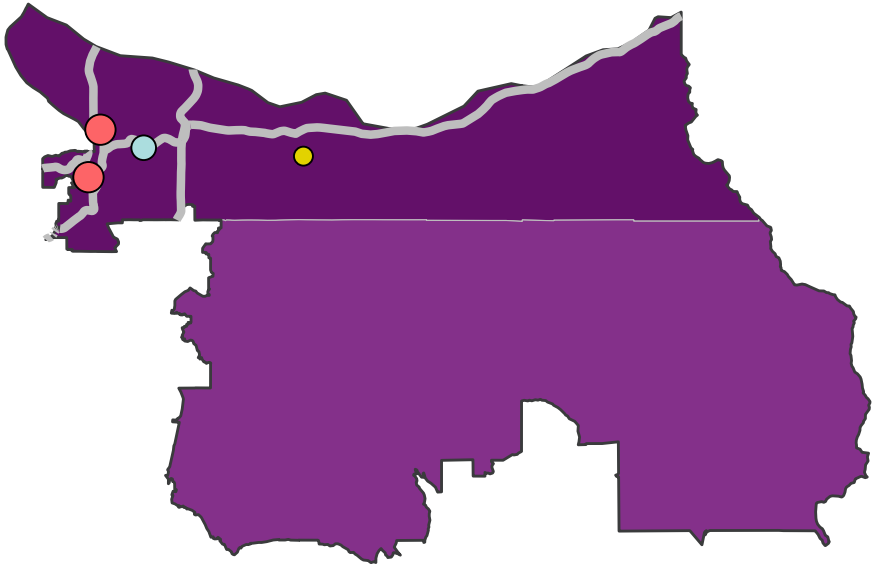
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

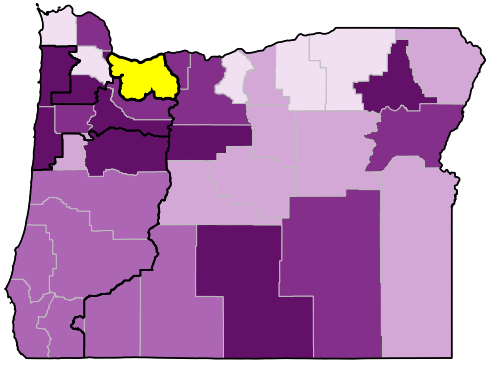
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 3

The map for Congressional District 3 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 88 − 92 per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 3 (1 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253913

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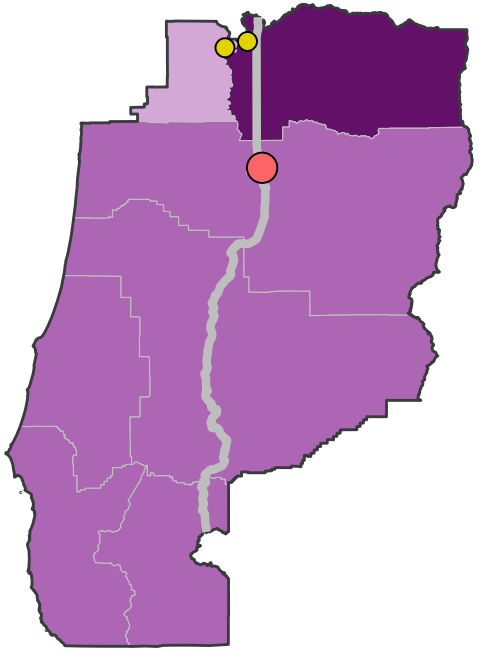
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

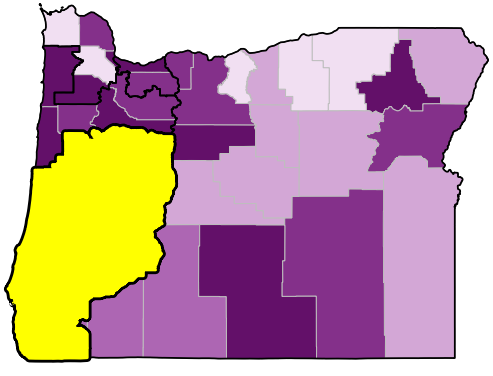
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 4

The map for Congressional District 4 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 122 per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253914

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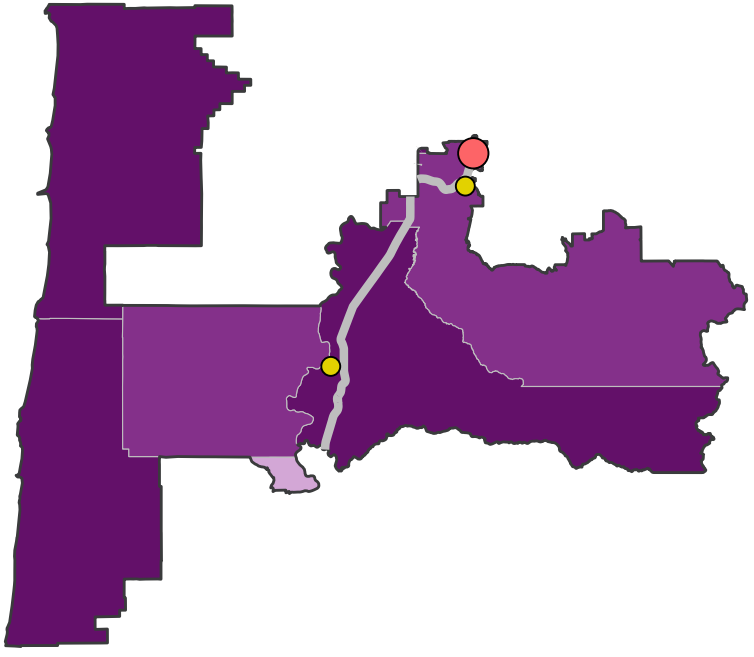
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

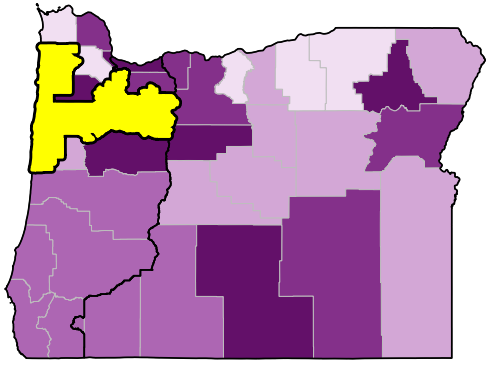
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 5

The map for Congressional District 5 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 83 − 111 per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 5 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253915

OREGON

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 75 − 79
- 79 − 84
- 84 − 88
- 88 − 92
- 92 − 122

County*

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

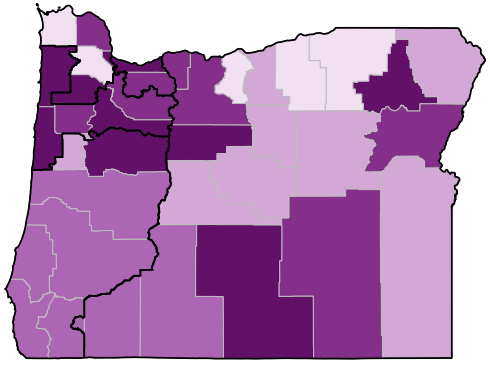
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Oregon

88 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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OREGON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Oregon Congressional District 6

The map for Congressional District 6 in Oregon shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Oregon and the United States, stroke death rates are 88 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 6 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253916

PENNSYLVANIA

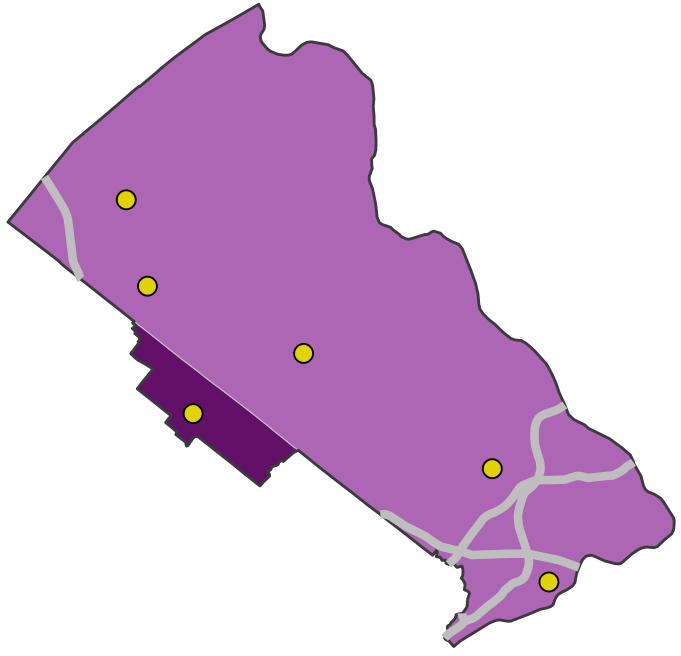
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

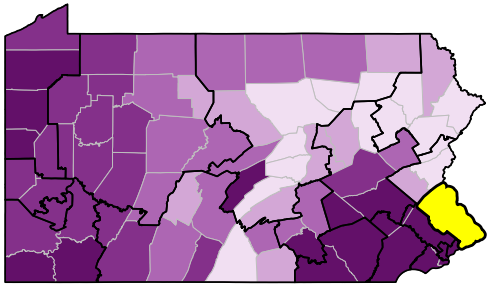
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 1

The map for Congressional District 1 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 82 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253917

PENNSYLVANIA

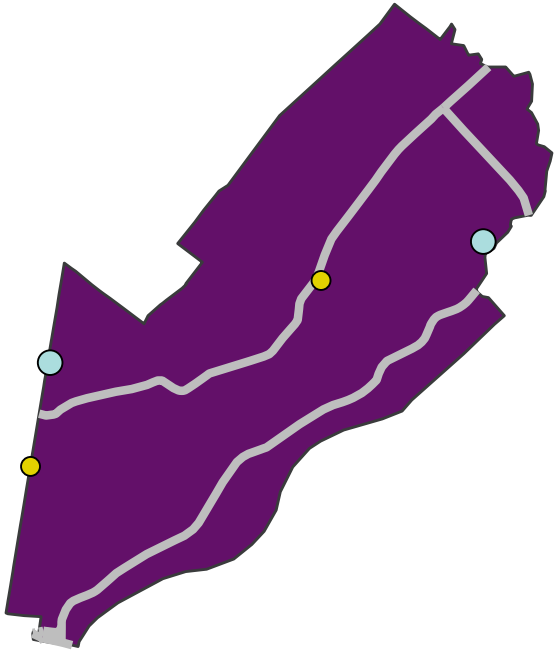
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

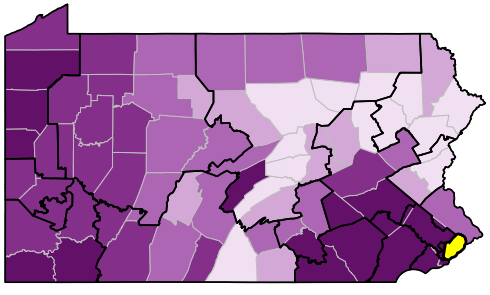
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 2

The map for Congressional District 2 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for Philadelphia County, the single county represented in the district, is 80 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (2 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253918

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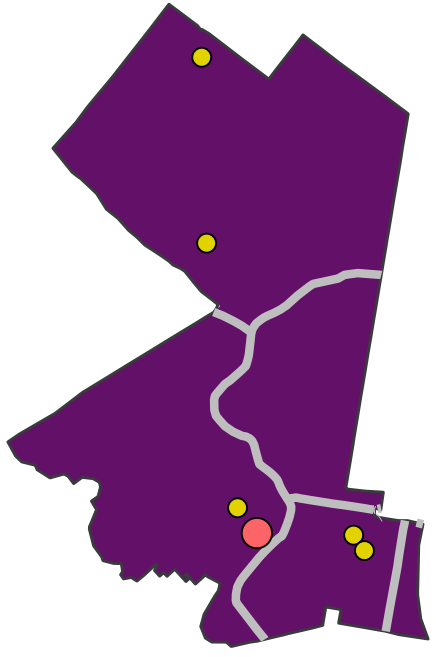
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

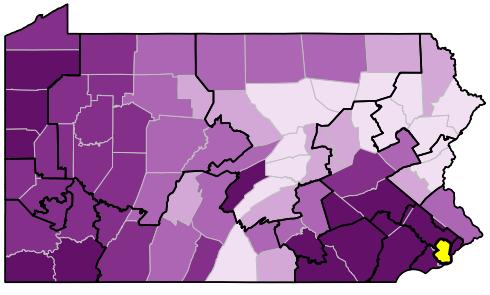
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 3

The map for Congressional District 3 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 82 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253919

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Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

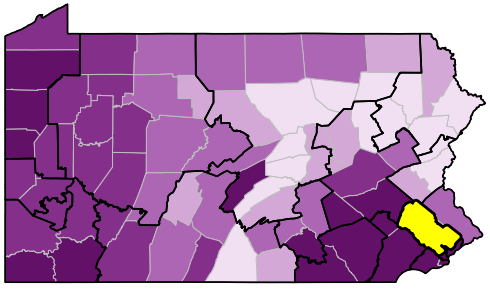
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 4

The map for Congressional District 4 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 83 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253920

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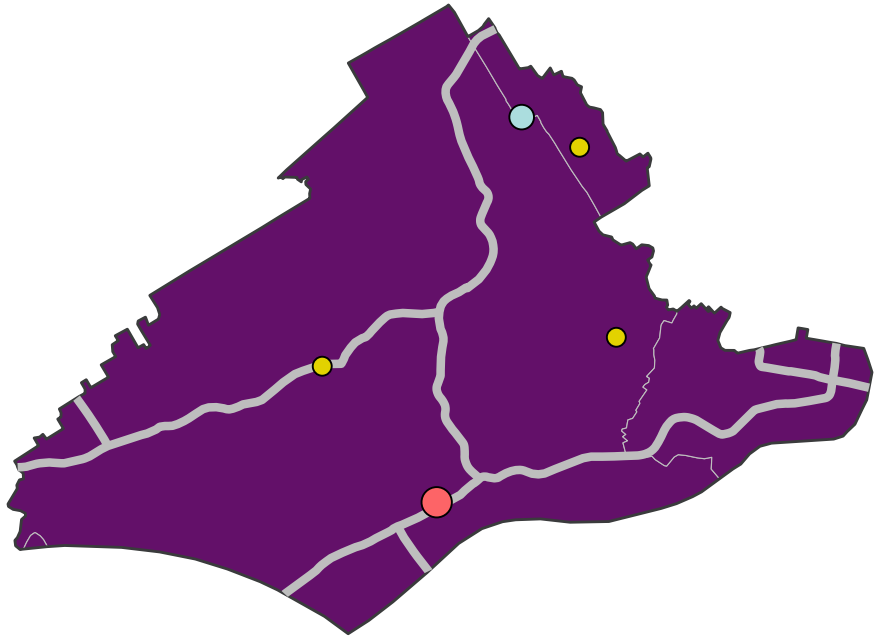
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

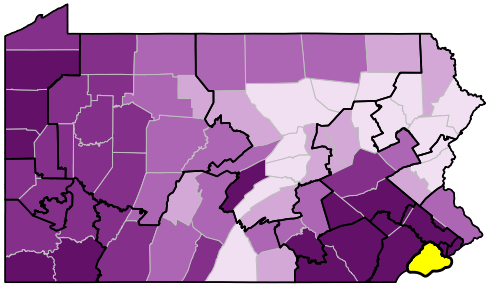
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 5

The map for Congressional District 5 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 82 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (3 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253921

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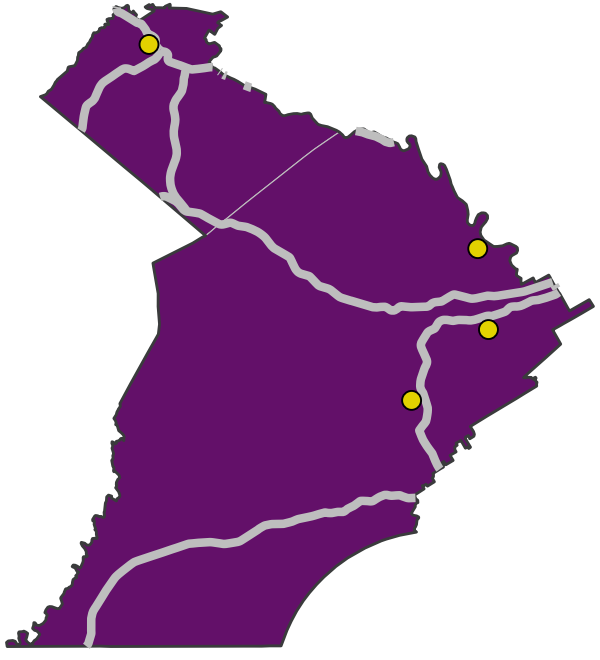
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 6



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

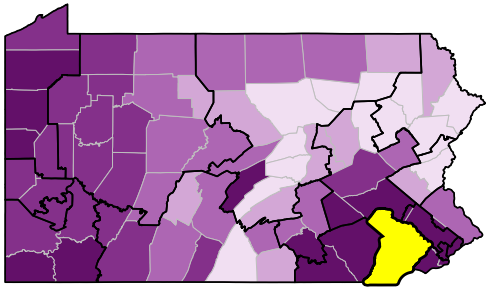
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 6

The map for Congressional District 6 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 83 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 6 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253922

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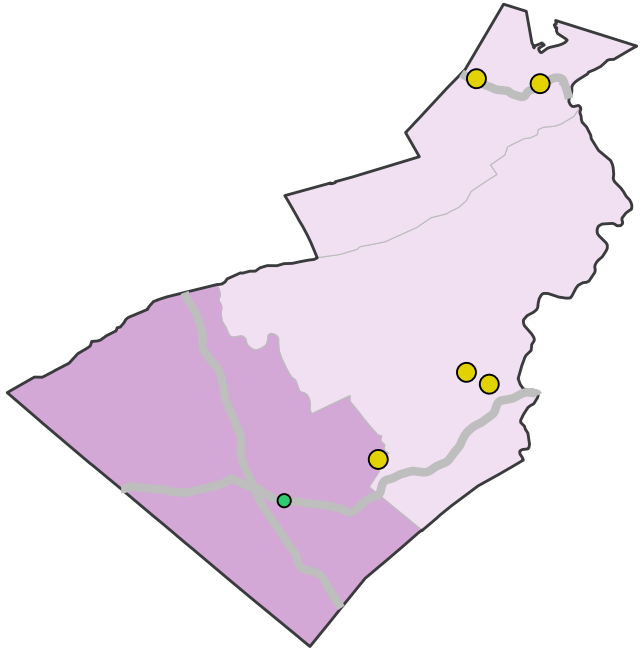
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

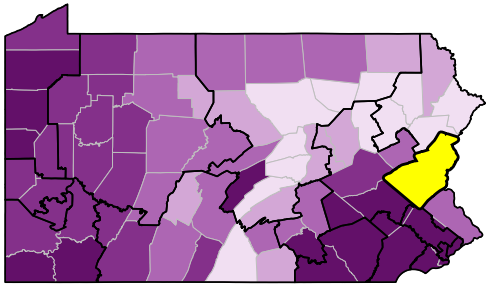
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 7

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 7

The map for Congressional District 7 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 62 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 7 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253923

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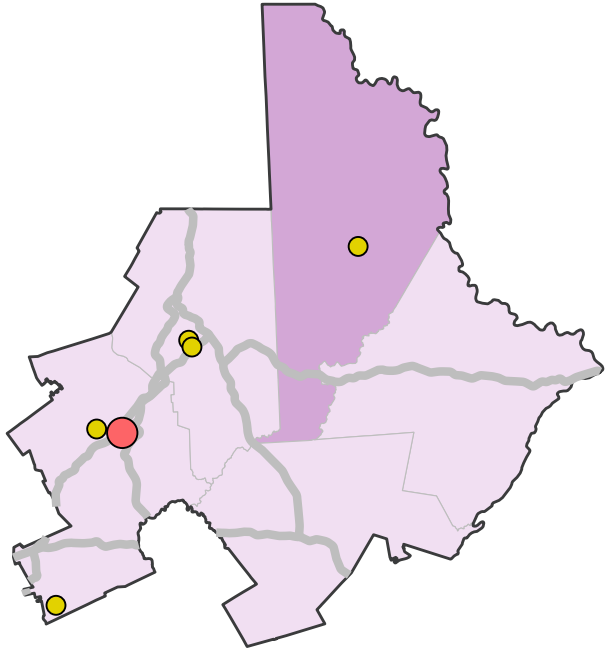
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

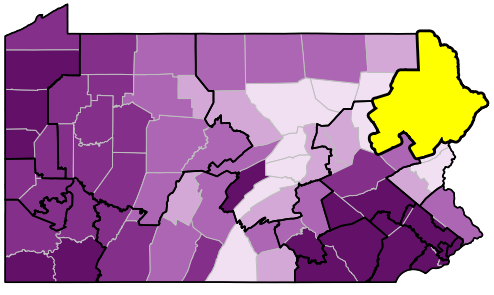
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
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  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
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  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 8

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 8

The map for Congressional District 8 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 60 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 8 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253924

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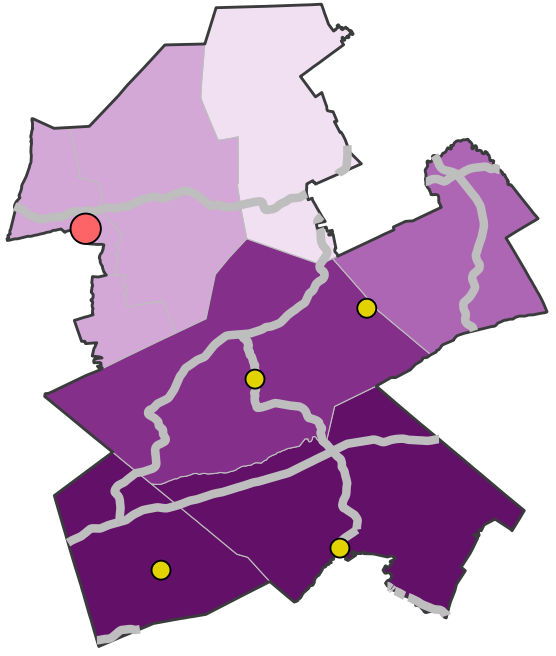
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

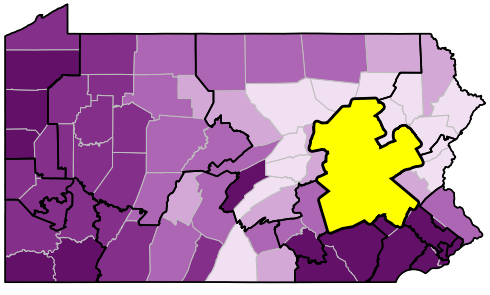
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 9

The map for Congressional District 9 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 83 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 9 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253925

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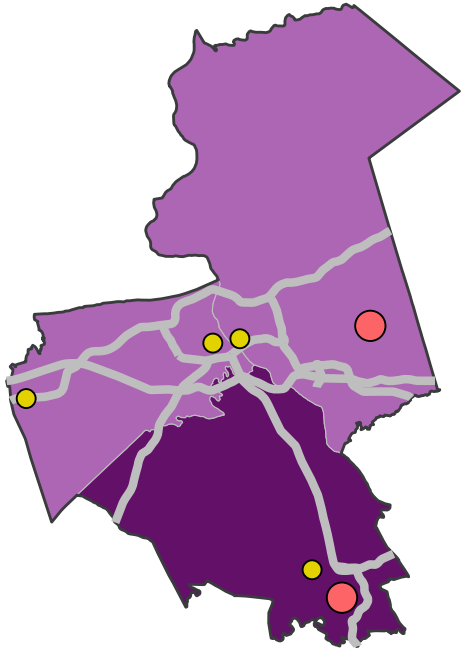
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 10



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

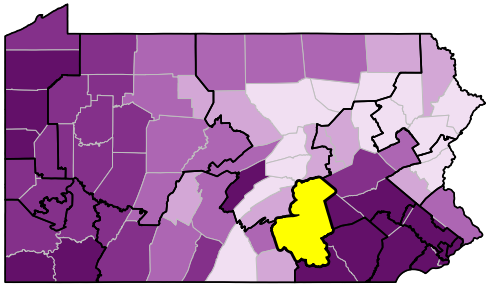
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 10

The map for Congressional District 10 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 74 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 10 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253926

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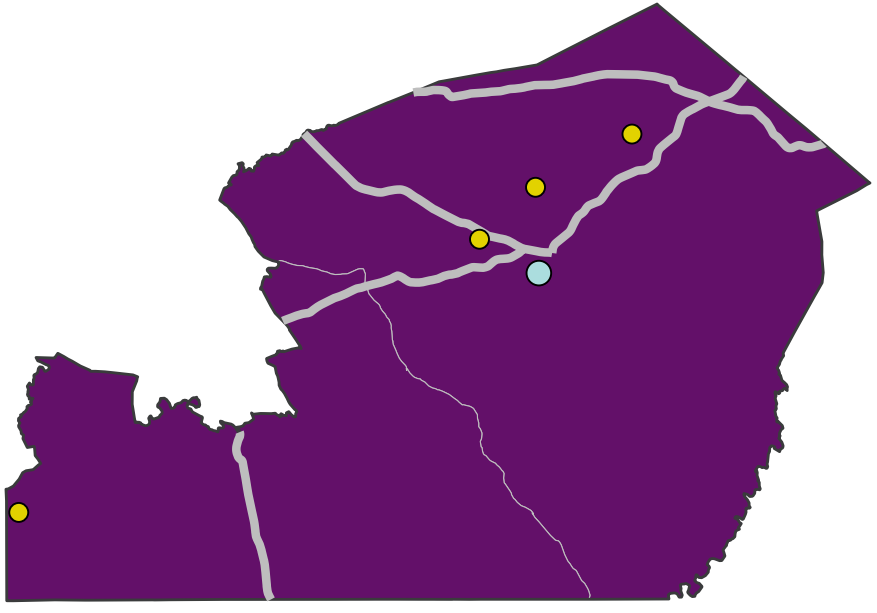
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

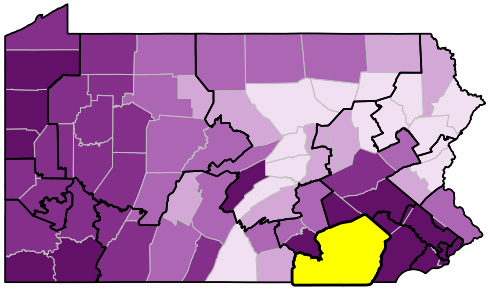
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 11

The map for Congressional District 11 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 74 − 81 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 11 (4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253927

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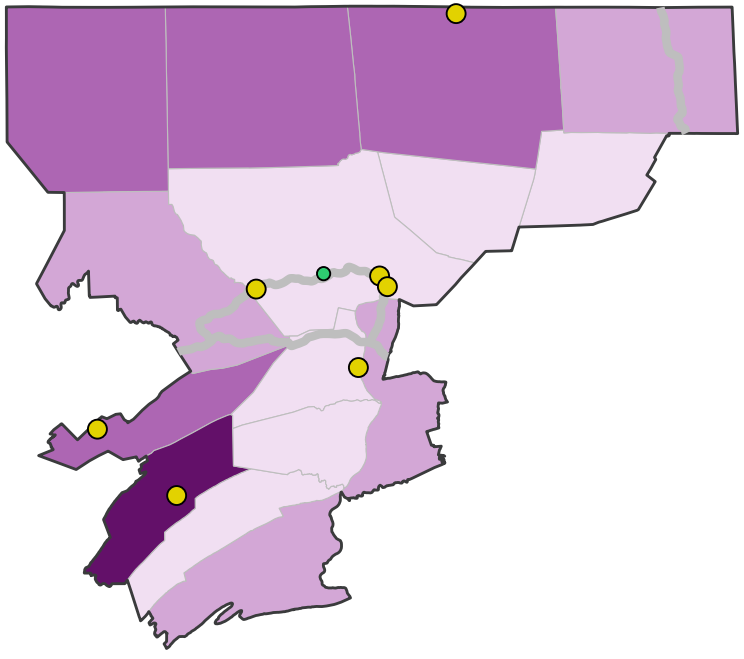
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

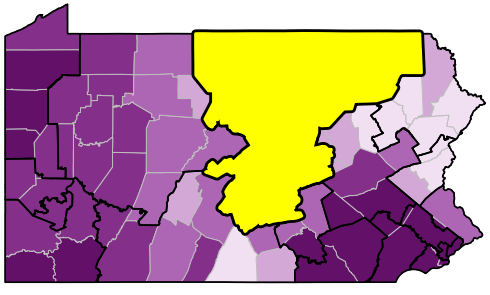
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 12

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

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A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 12

The map for Congressional District 12 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 46 − 75 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 12 (1 Acute, 7 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253928

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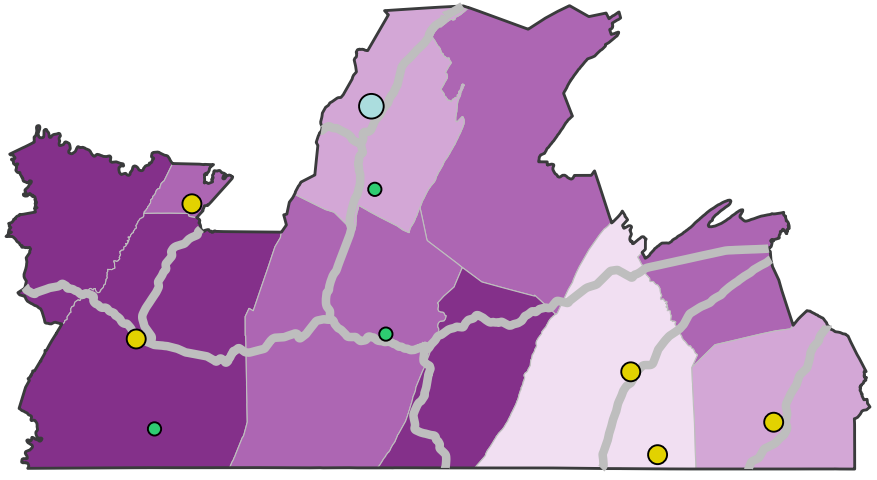
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 13



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

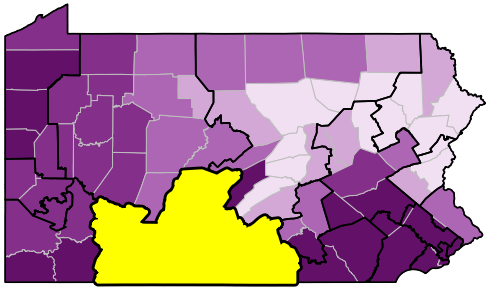
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 13

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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What is the geographic unit for the stroke death rates?

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How are the Stroke death rates calculated?

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Map Description: Pennsylvania Congressional District 13

The map for Congressional District 13 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 71 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 13 (3 Acute, 5 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253929

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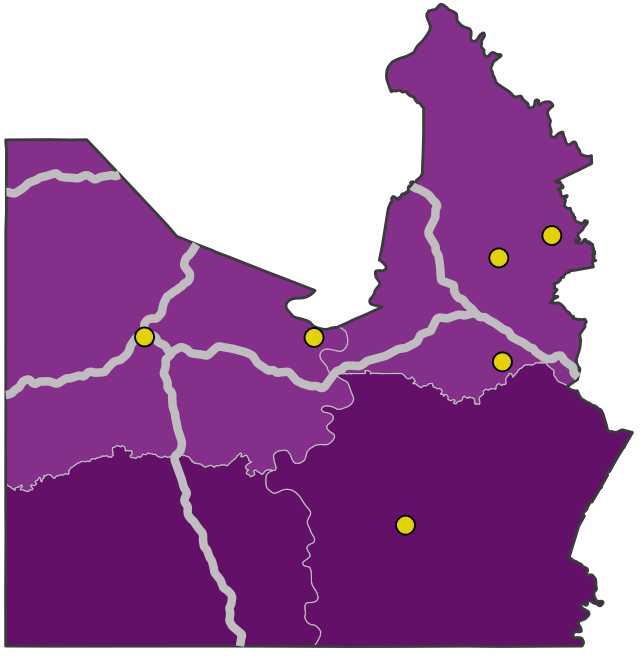
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

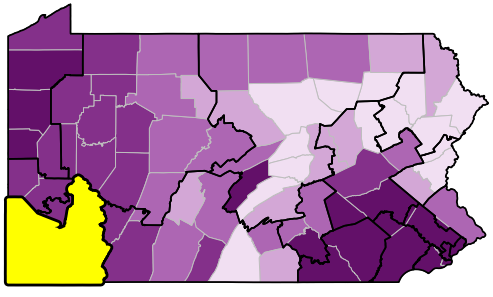
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 14

The map for Congressional District 14 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 75 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 14 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253930

PENNSYLVANIA

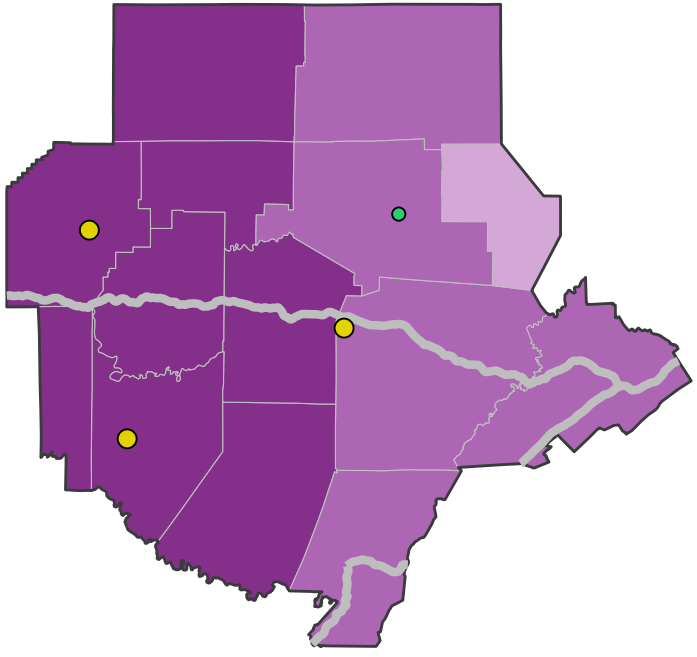
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 15

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

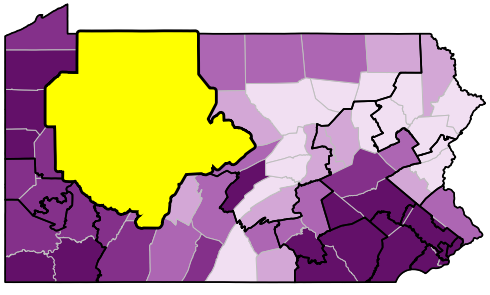
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 15

The map for Congressional District 15 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 73 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 15 (1 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253931

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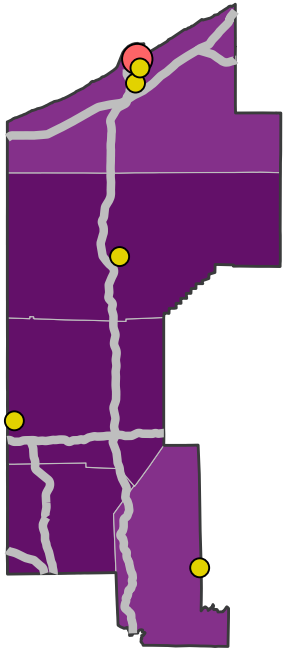
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 16

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

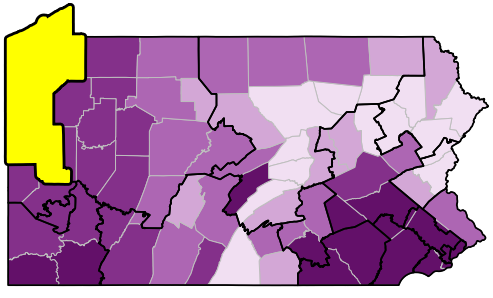
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 16

The map for Congressional District 16 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 85 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 16 (5 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253932

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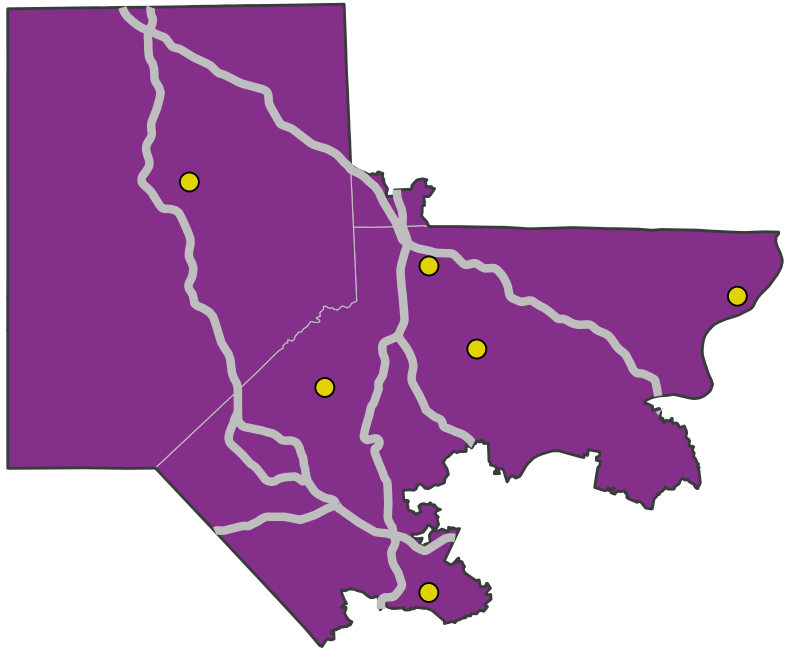
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 17



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 46 − 59
- 59 − 63
- 63 − 68
- 68 − 74
- 74 − 85

- County*
- Highway

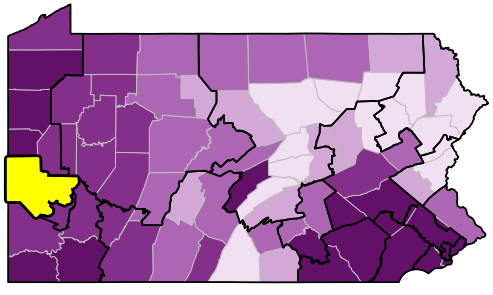
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Pennsylvania

66 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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PENNSYLVANIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Pennsylvania Congressional District 17

The map for Congressional District 17 in Pennsylvania shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 69 per 100,000. For Pennsylvania and the United States, stroke death rates are 66 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 17 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253933

RHODE ISLAND

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 51
- 55
- 56
- 58

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

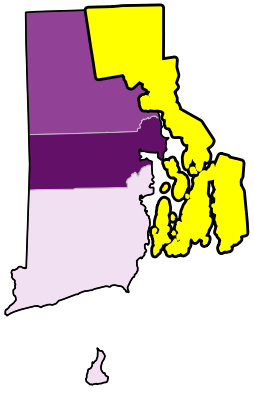
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

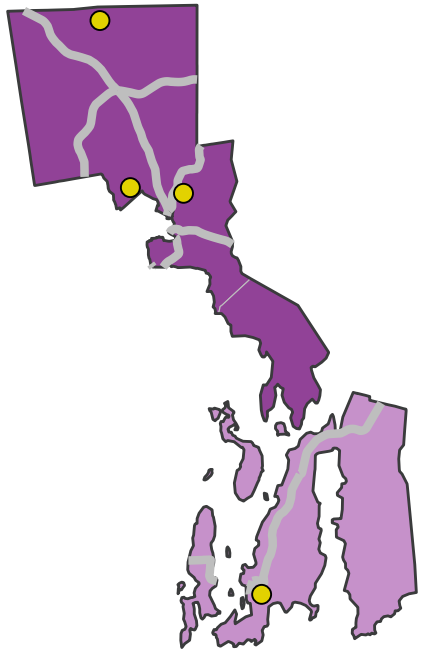
Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Rhode Island

55 per 100,000 persons



Congressional District 1



*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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RHODE ISLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Rhode Island Congressional District 1

The map for Congressional District 1 in Rhode Island shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 55 − 56 per 100,000. For Rhode Island and the United States, stroke death rates are 55 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253934

RHODE ISLAND

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 51
- 55
- 56
- 58

County*
Highway

Stroke Centers

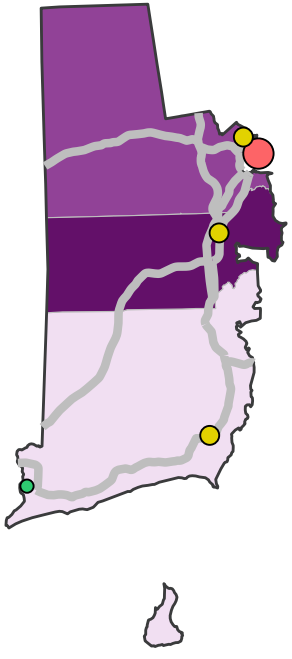
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

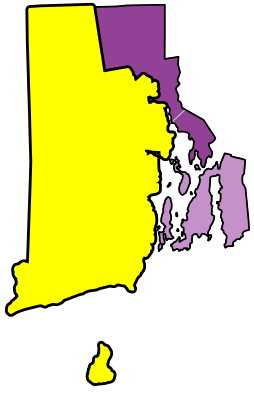
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Rhode Island

55 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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RHODE ISLAND

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Rhode Island Congressional District 2

The map for Congressional District 2 in Rhode Island shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 51 − 58 per 100,000. For Rhode Island and the United States, stroke death rates are 55 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 2 (1 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253935

SOUTH CAROLINA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

Stroke Centers

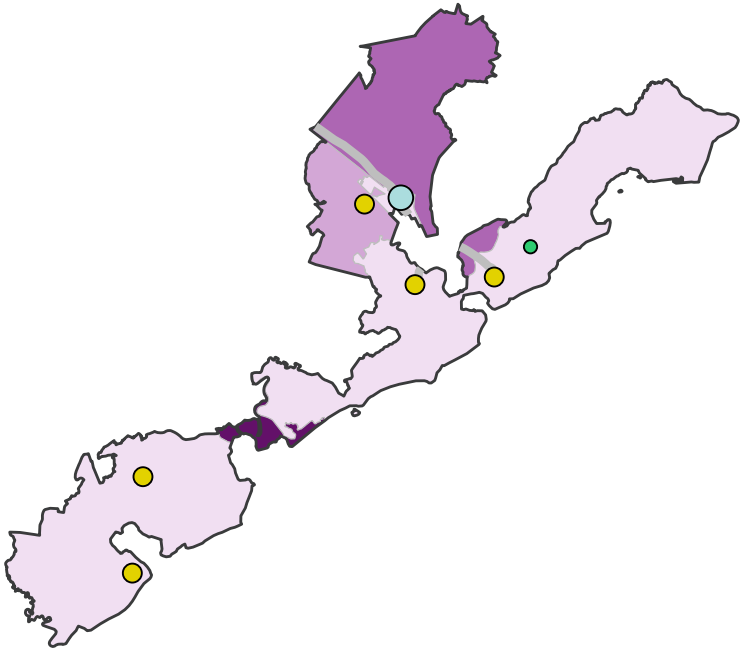
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

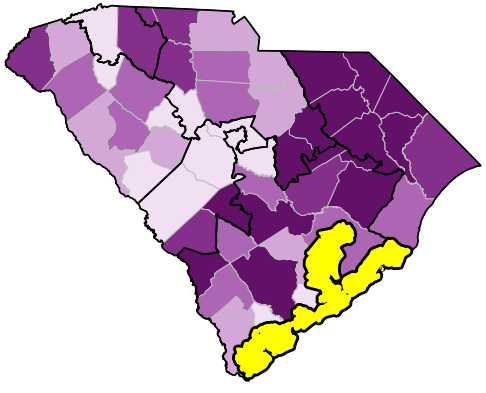
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 1

The map for Congressional District 1 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 105 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 1 (1 Acute, 5 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253936

SOUTH CAROLINA

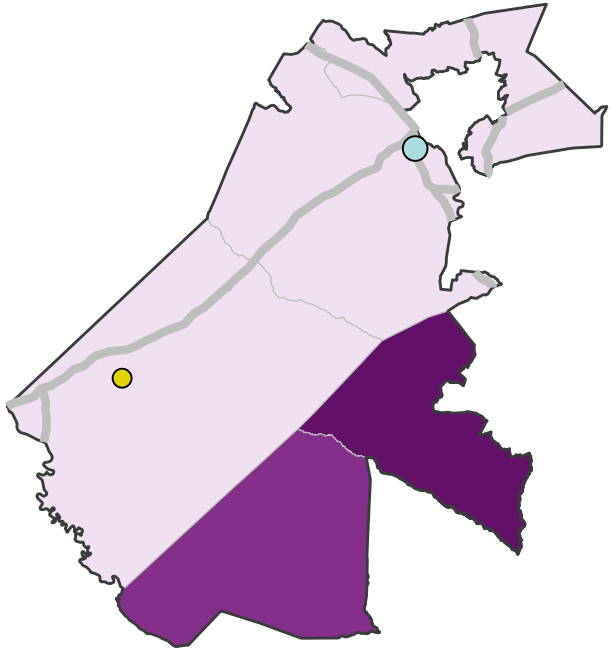
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

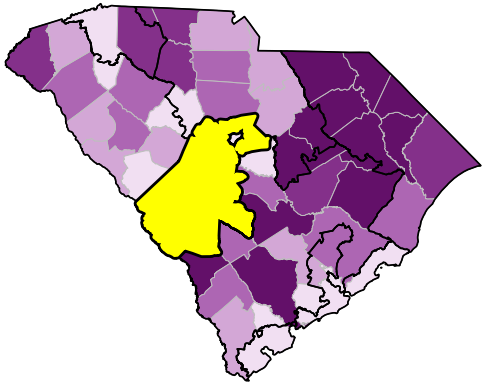
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 2

The map for Congressional District 2 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 106 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 2 (1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253937

SOUTH CAROLINA

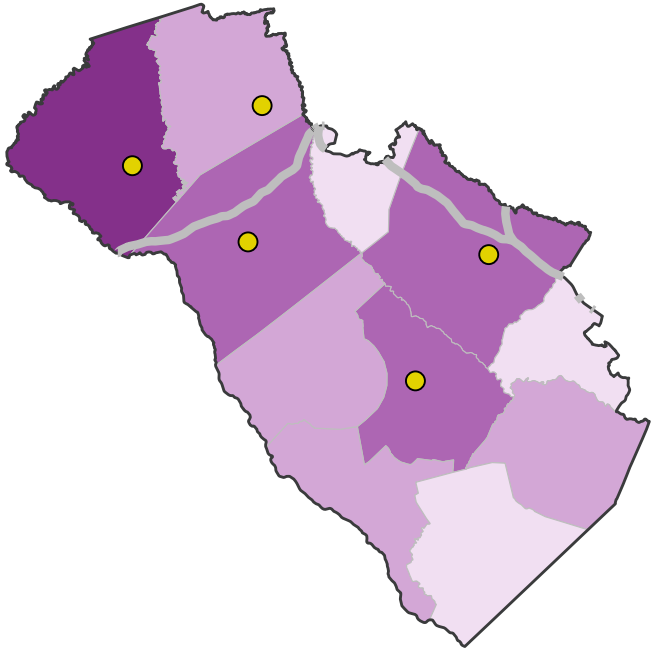
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

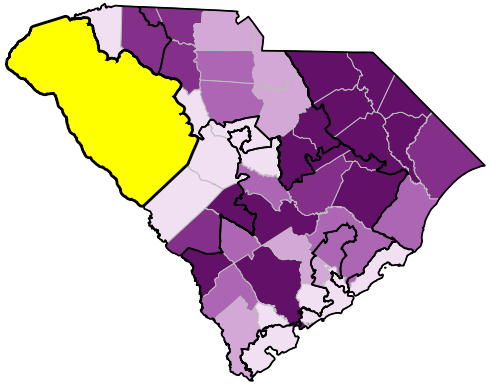
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 3

The map for Congressional District 3 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 95 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 3 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253938

SOUTH CAROLINA

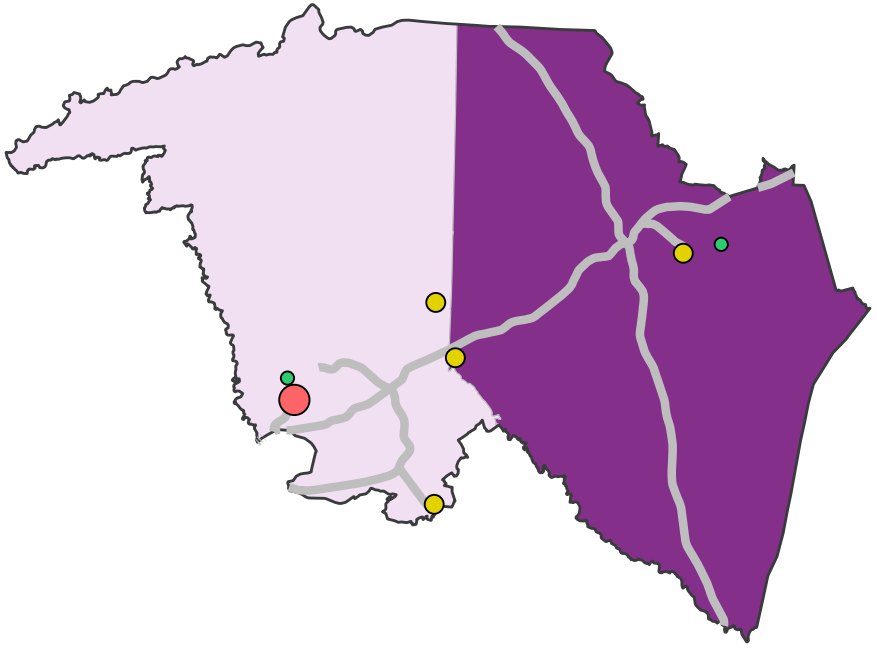
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 4



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

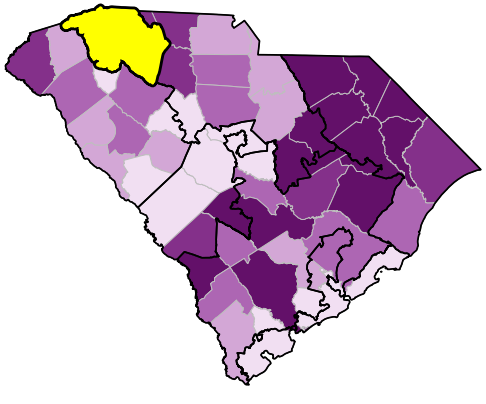
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 4

The map for Congressional District 4 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 94 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 4 (2 Acute, 4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253939

SOUTH CAROLINA

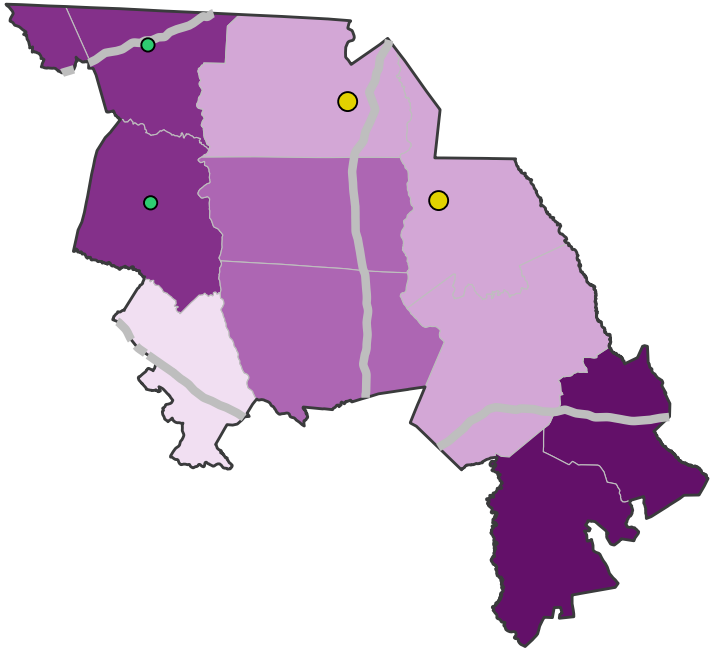
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

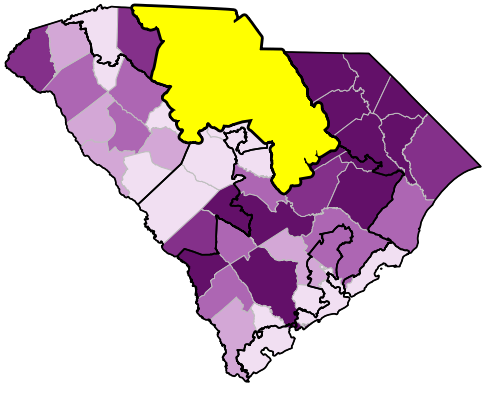
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 5

The map for Congressional District 5 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 134 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 5 (2 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253940

SOUTH CAROLINA

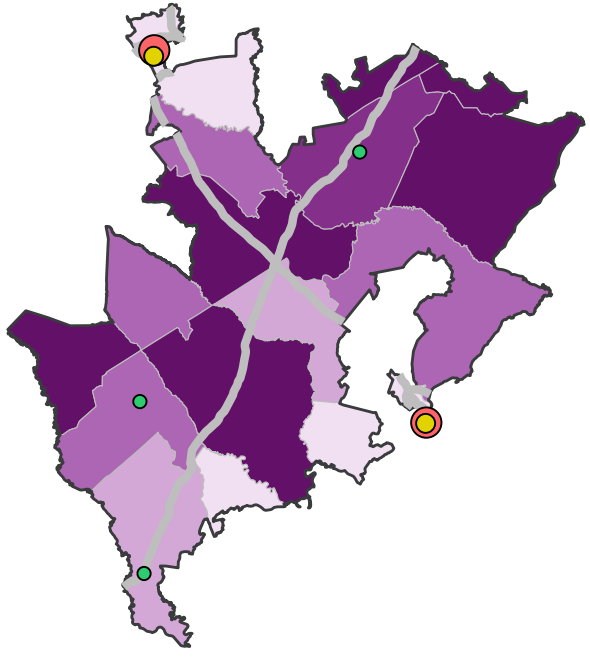
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

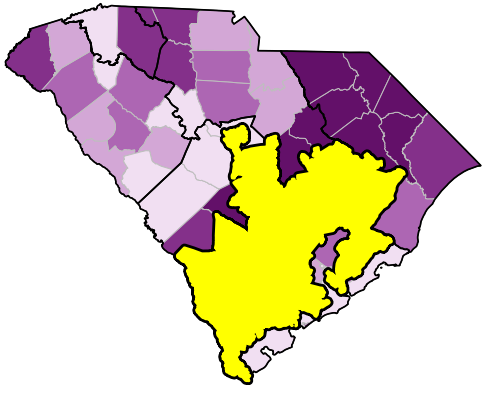
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 6

The map for Congressional District 6 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 153 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 6 (3 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253941

SOUTH CAROLINA

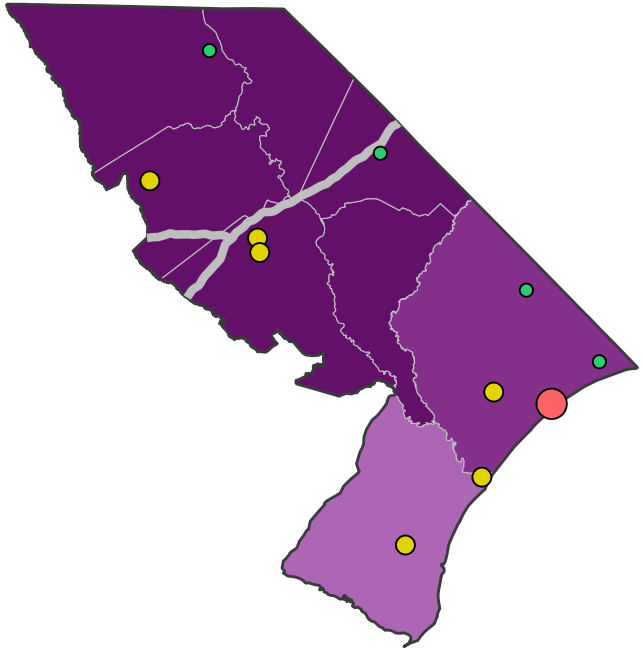
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 78
- 78 − 85
- 85 − 94
- 94 − 105
- 105 − 208

- County*
- Highway

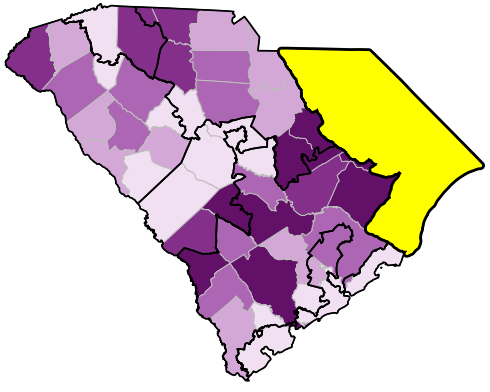
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | South Carolina

97 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH CAROLINA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Carolina Congressional District 7

The map for Congressional District 7 in South Carolina shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 85 − 208 per 100,000. For South Carolina and the United States, stroke death rates are 97 and 80 per 100,000, respectively.

There are a total of 11 stroke centers in District 7 (4 Acute, 6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253942

SOUTH DAKOTA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 26 − 54
- 54 − 60
- 60 − 66
- 66 − 76
- 76 − 104
- Insufficient Data
- County*
- Highway

Stroke Centers

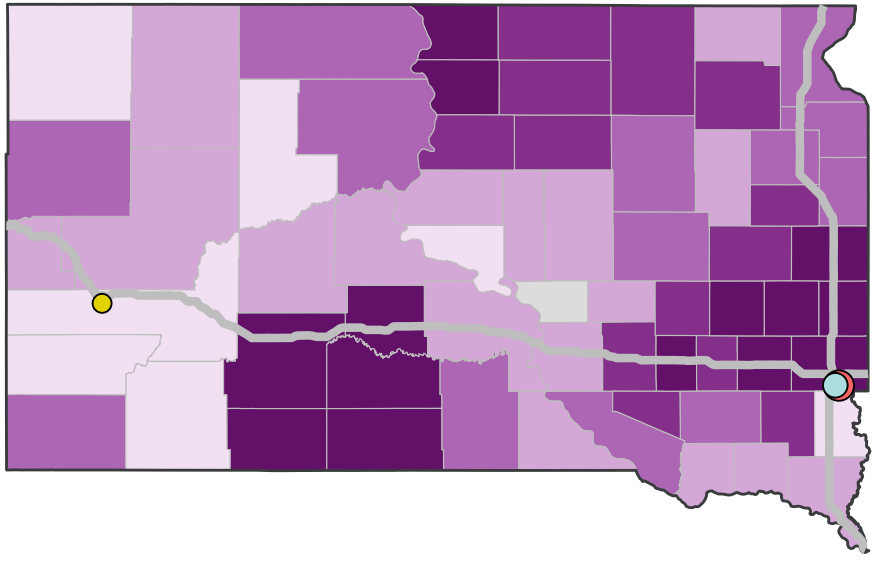
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | South Dakota

65 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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SOUTH DAKOTA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: South Dakota Congressional District 1

The map for Congressional District 1 in South Dakota shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 26 − 104 per 100,000. For South Dakota and the United States, stroke death rates are 65 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253943

TENNESSEE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

County*
Highway

Stroke Centers

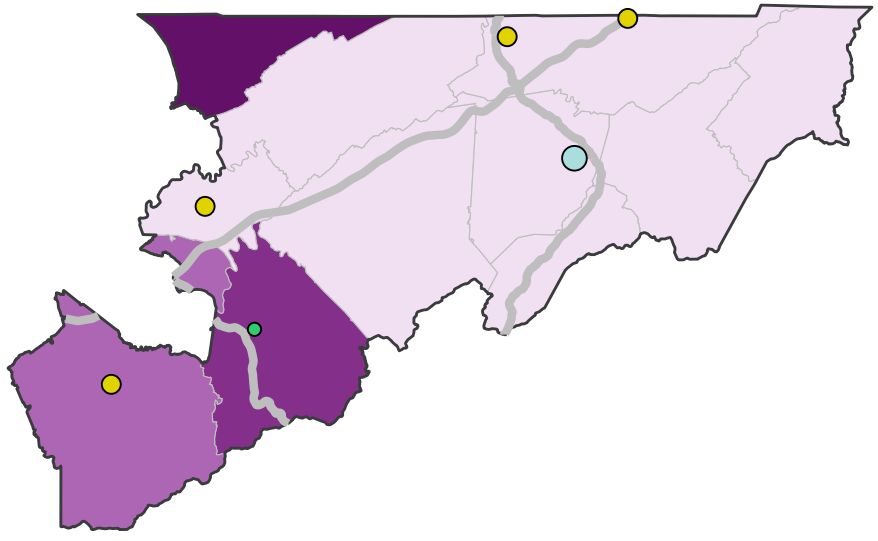
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

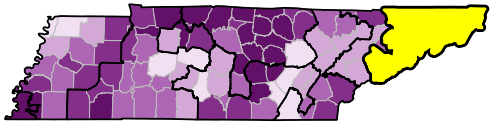
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 1

The map for Congressional District 1 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 99 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (1 Acute, 4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253944

TENNESSEE

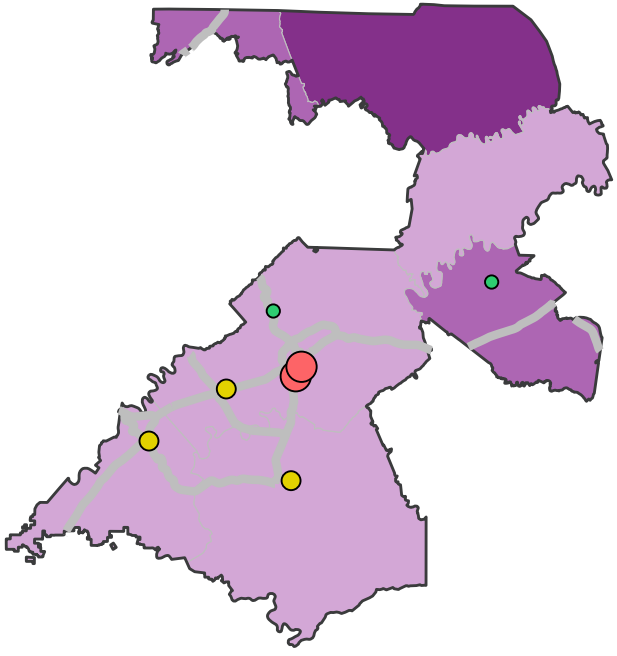
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

- County*
- Highway

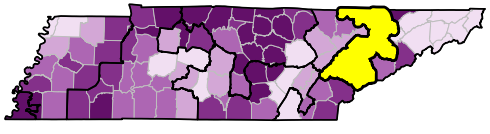
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 2

The map for Congressional District 2 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 81 − 93 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 2 (2 Acute, 3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253945

TENNESSEE

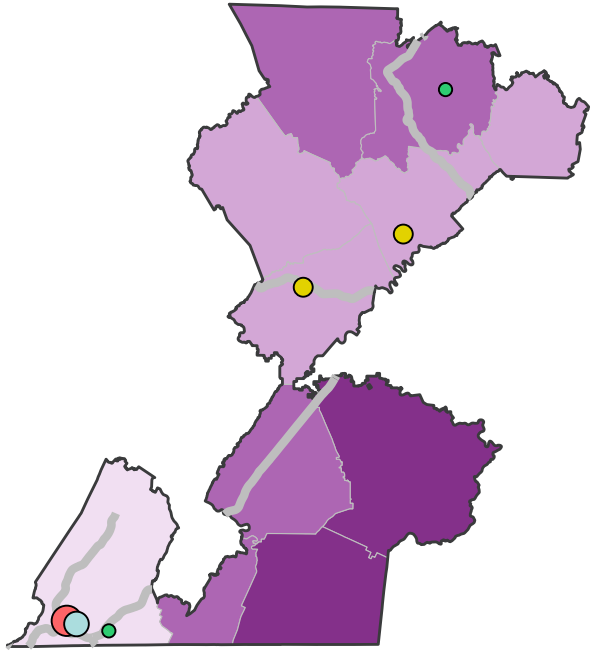
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

- County*
- Highway

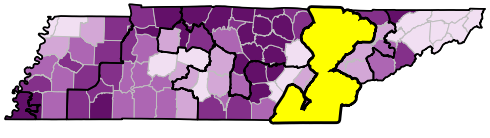
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 3

The map for Congressional District 3 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 80 − 93 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (2 Acute, 2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253946

TENNESSEE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

County*
Highway

Stroke Centers

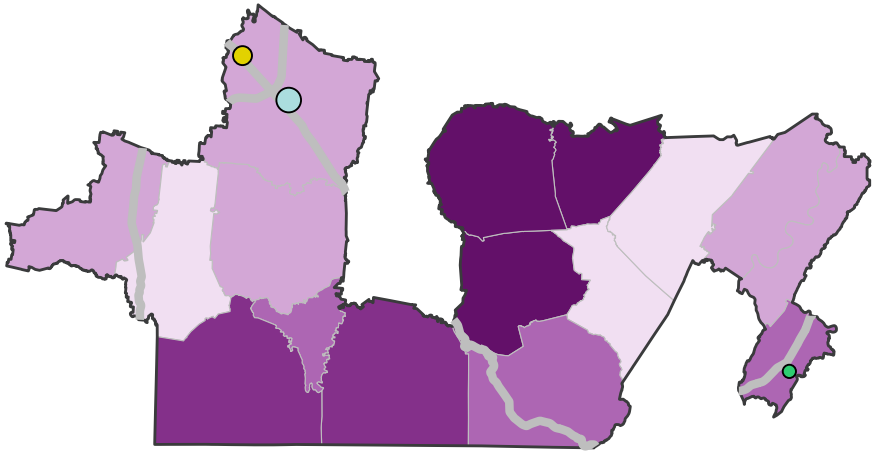
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

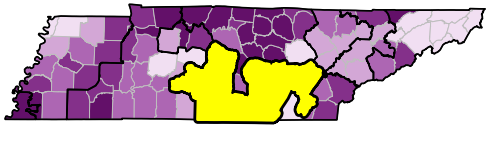
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 4

The map for Congressional District 4 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 74 − 151 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (1 Acute, 1 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253947

TENNESSEE

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

County*
Highway

Stroke Centers

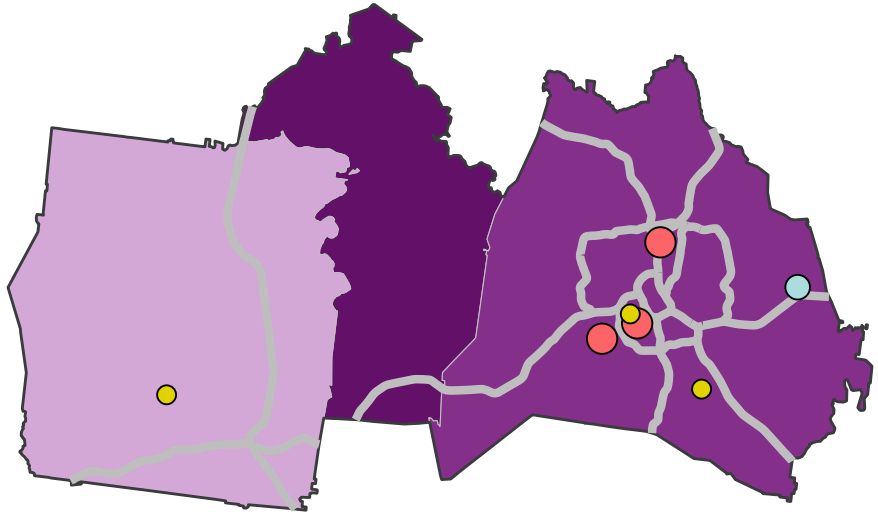
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

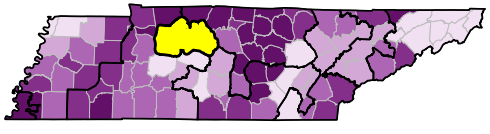
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 5

The map for Congressional District 5 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 104 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 5 (3 Primary, 1 Thrombectomy, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253948

TENNESSEE

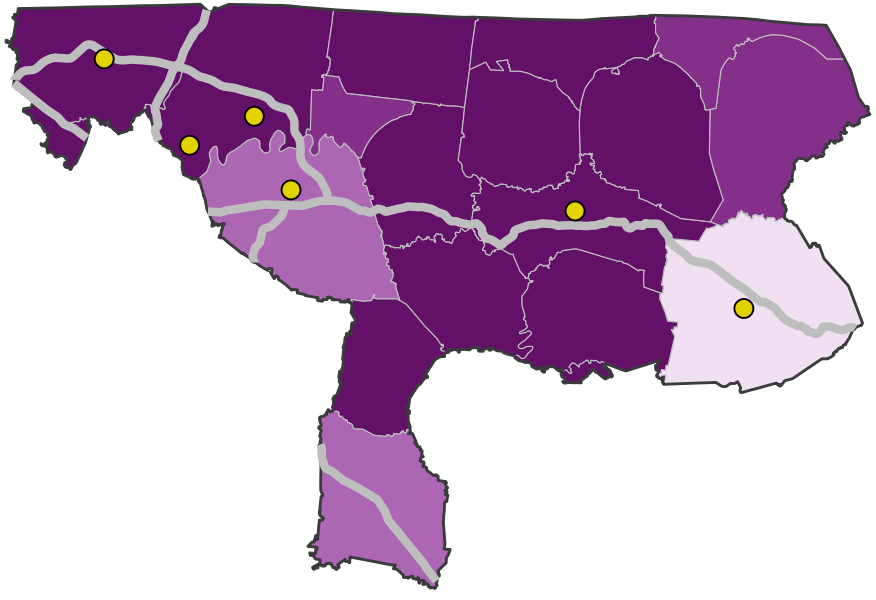
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

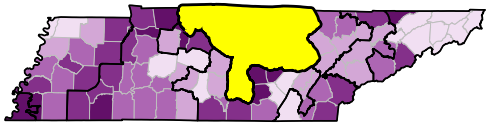
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 6

The map for Congressional District 6 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 126 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 6 (6 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253949

TENNESSEE

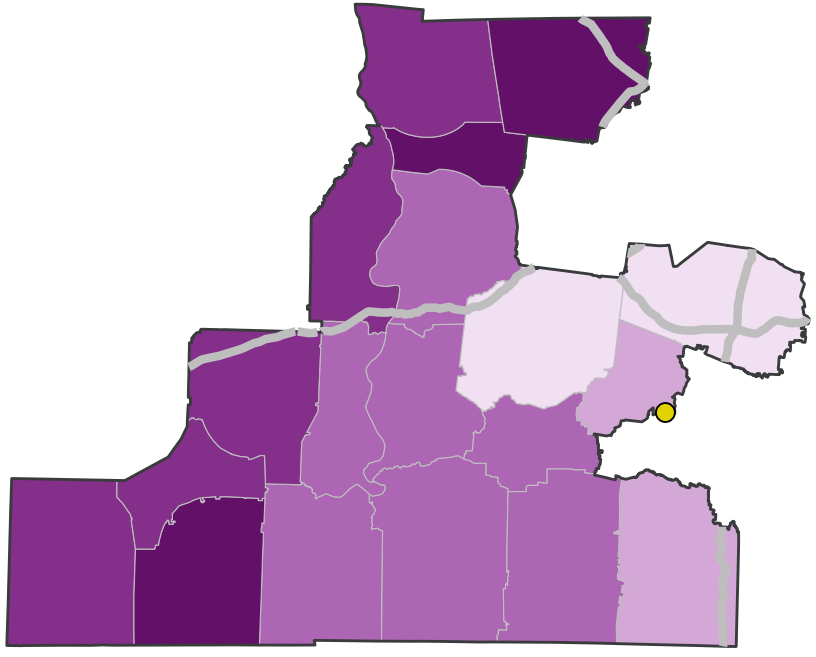
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 7



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

- County*
- Highway

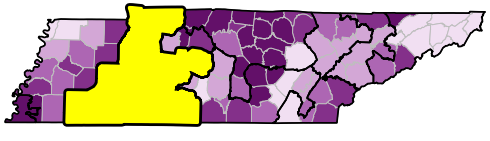
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 7

The map for Congressional District 7 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 66 − 102 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There is only 1 stroke center in District 7 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253950

TENNESSEE

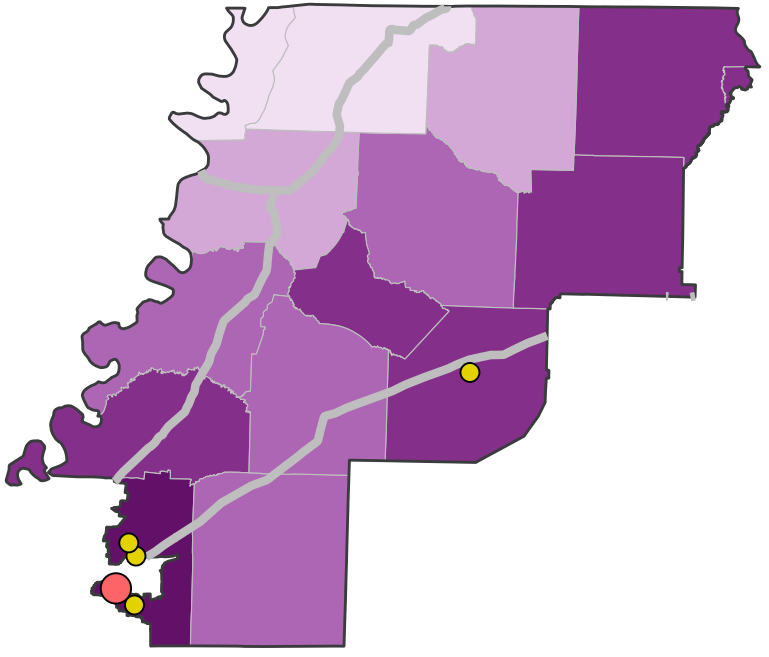
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

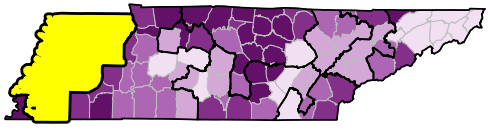
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 8

The map for Congressional District 8 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 77 − 100 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 8 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253951

TENNESSEE

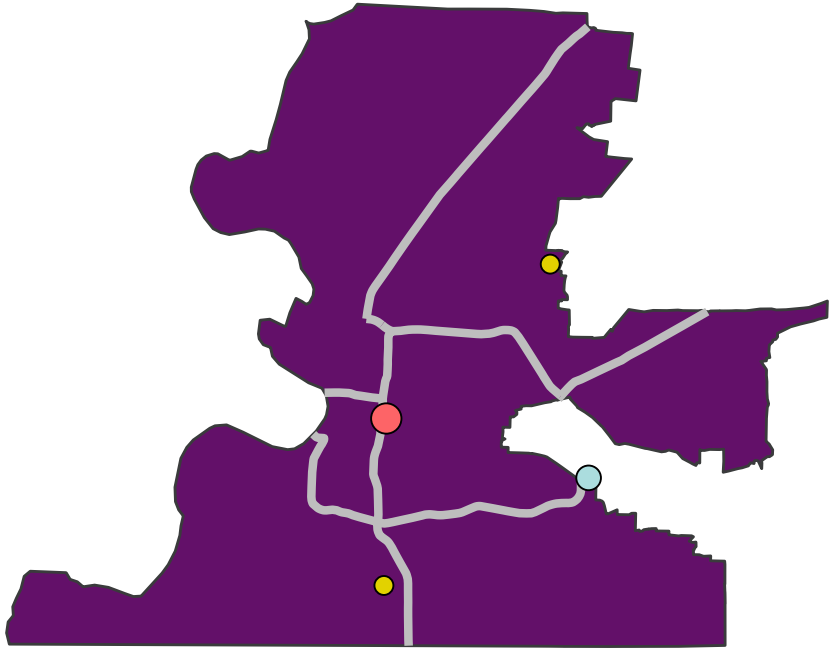
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 9



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 66 − 81
- 81 − 86
- 86 − 91
- 91 − 97
- 97 − 151

- County*
- Highway

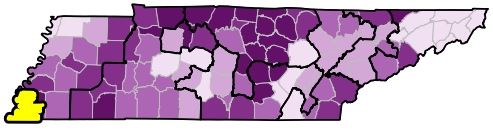
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Tennessee

90 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TENNESSEE

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Tennessee Congressional District 9

The map for Congressional District 9 in Tennessee shows that stroke death rates (ages 35+, 2021 − 2023) for Shelby County, the single county represented in the district, is 100 per 100,000. For Tennessee and the United States, stroke death rates are 90 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 9 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253952

TEXAS

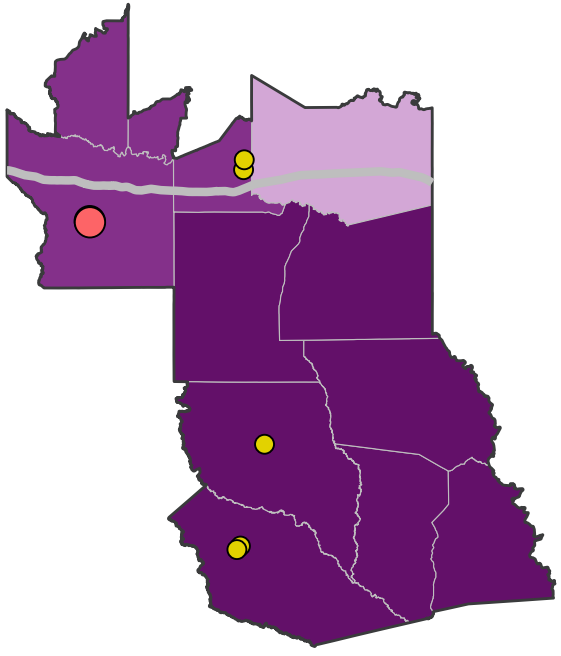
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

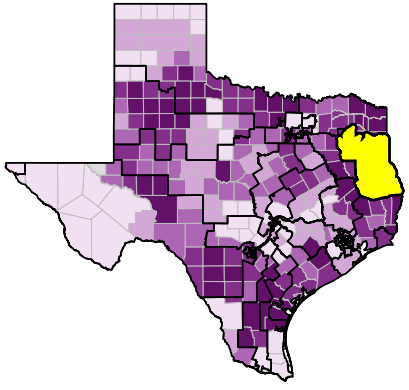
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 1

The map for Congressional District 1 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 104 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 1 (5 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253953

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

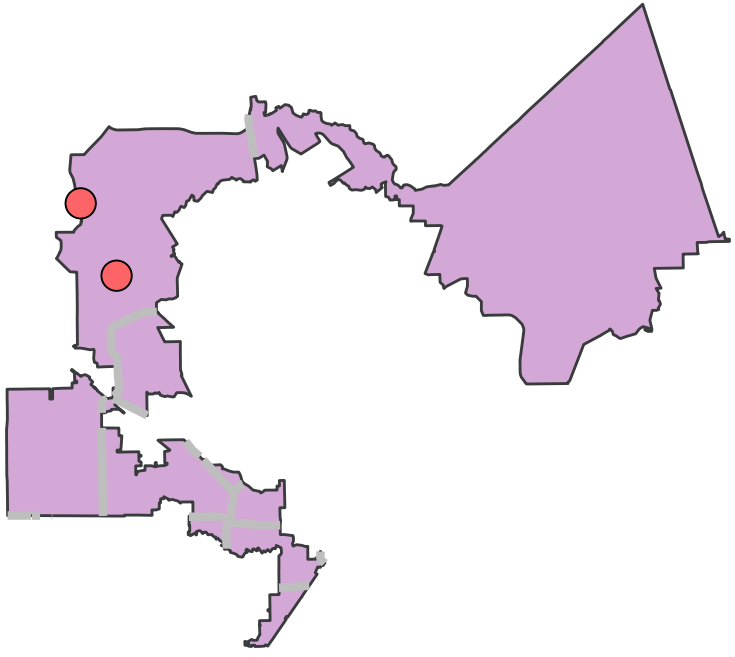
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

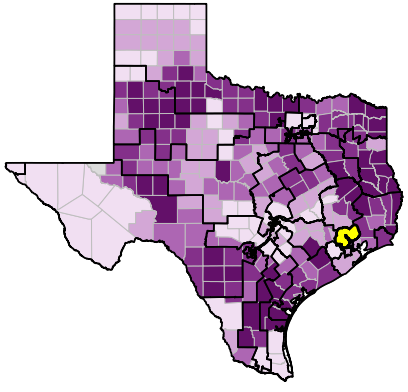
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 2

The map for Congressional District 2 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Harris County, the single county represented in the district, is 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 2 (2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253954

TEXAS

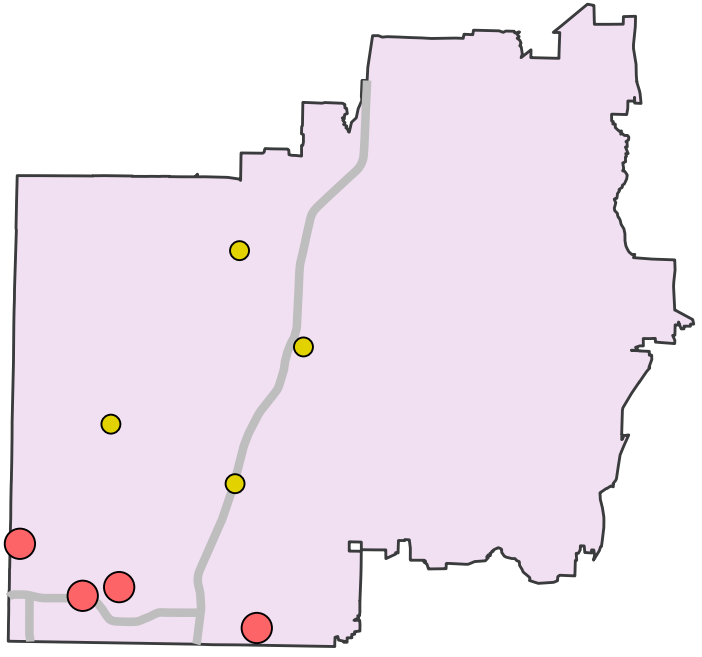
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

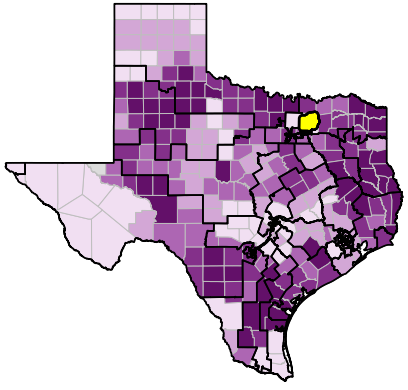
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 3

The map for Congressional District 3 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Collin County, the single county represented in the district, is 69 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 3 (4 Primary, 4 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253955

TEXAS

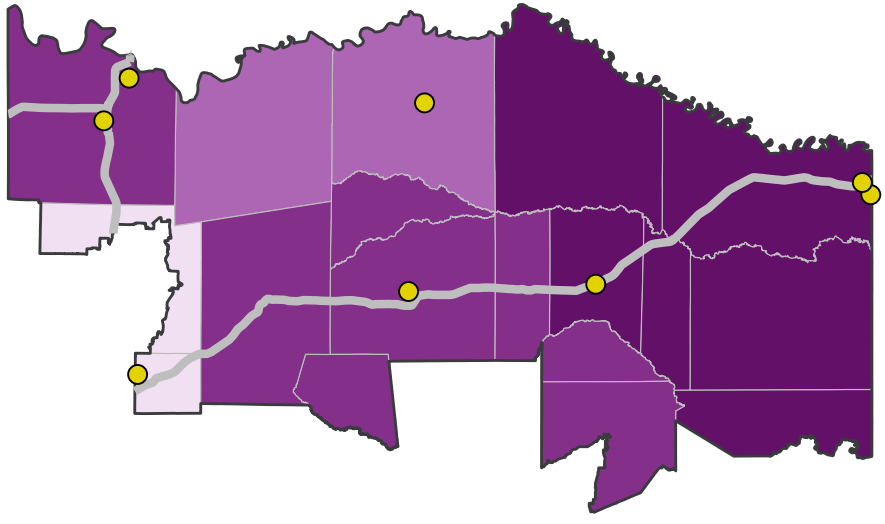
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

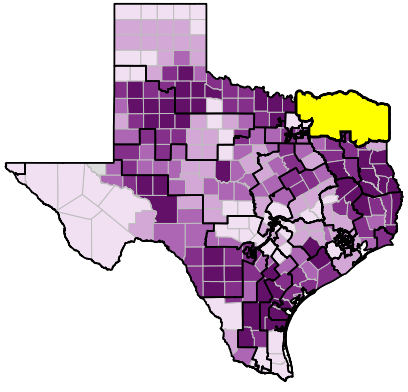
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 4

The map for Congressional District 4 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 118 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 4 (8 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253956

TEXAS

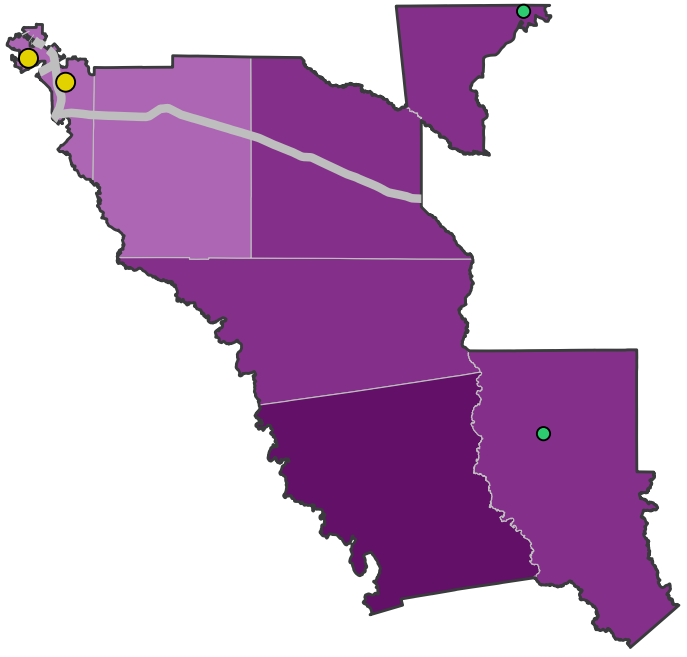
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

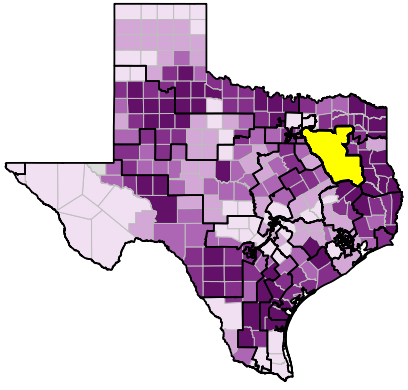
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 5

The map for Congressional District 5 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 127 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 5 (2 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253957

TEXAS

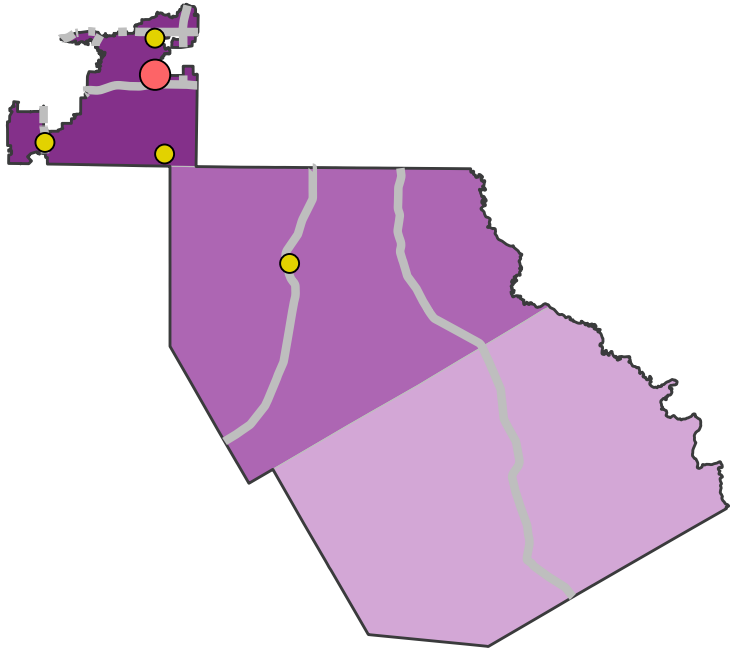
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

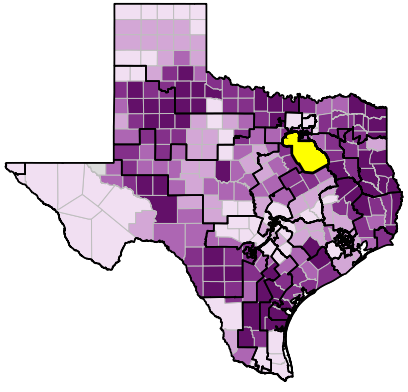
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 6

The map for Congressional District 6 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 91 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 6 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253958

TEXAS

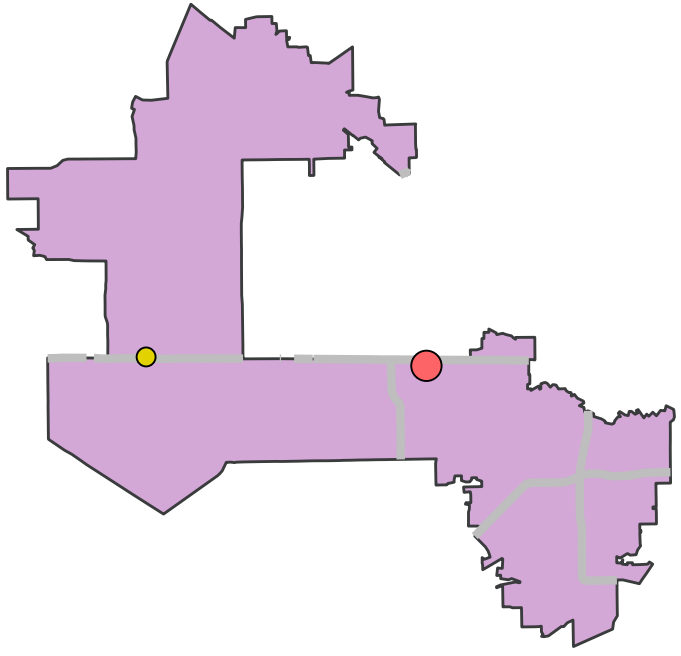
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

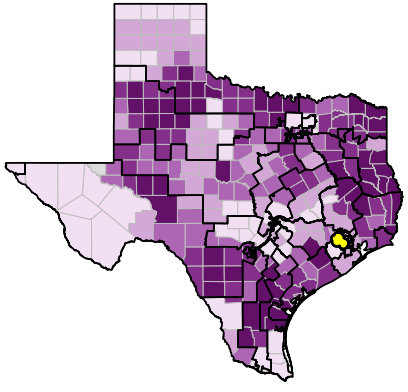
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 7

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 7

The map for Congressional District 7 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Harris County, the single county represented in the district, is 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 7 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253959

TEXAS

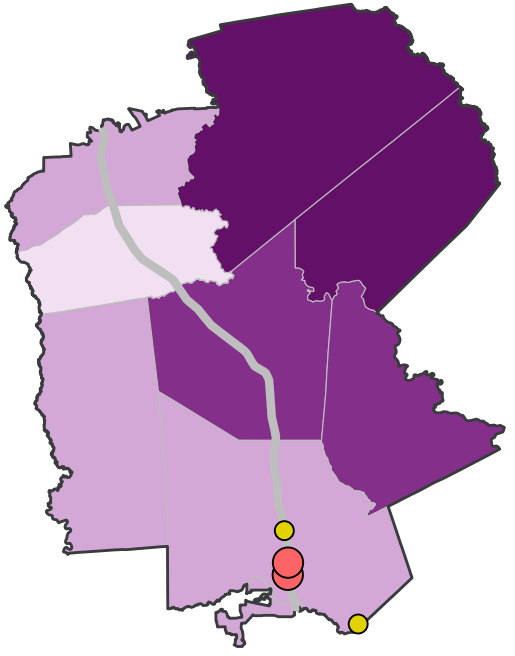
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

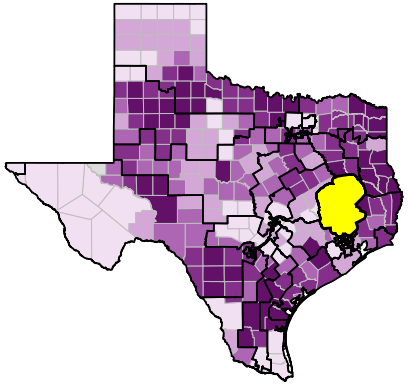
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 8

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 8

The map for Congressional District 8 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 139 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 8 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253960

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

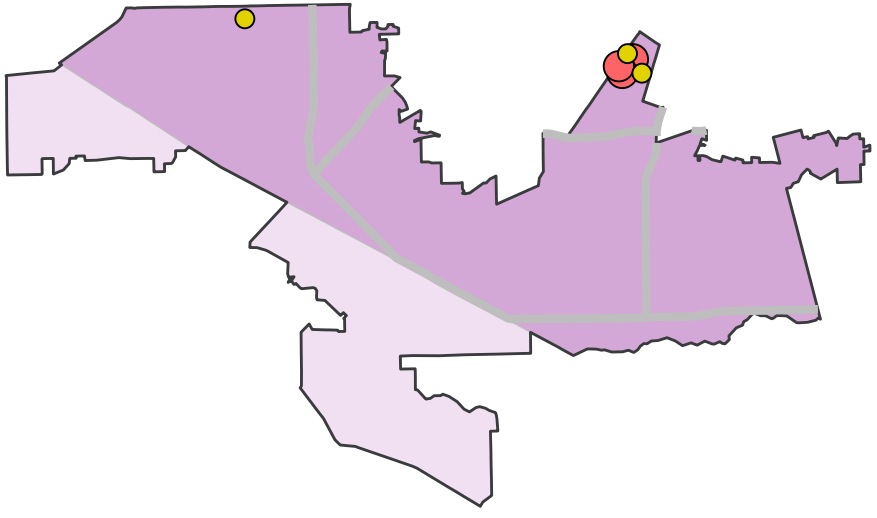
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

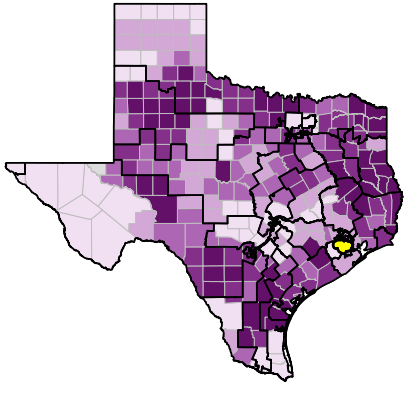
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 9

The map for Congressional District 9 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 9 (3 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253961

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

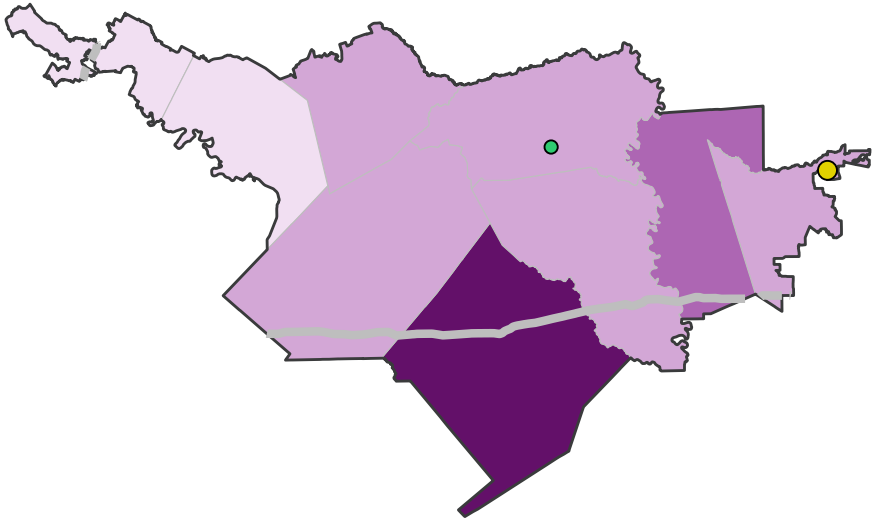
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

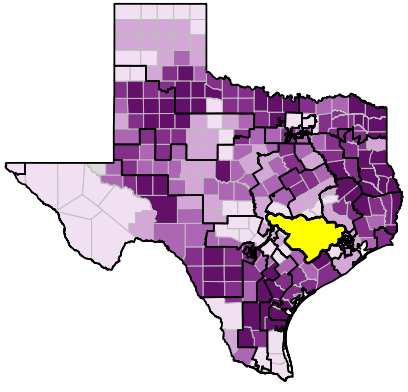
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 10

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 10

The map for Congressional District 10 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 98 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 10 (1 Acute, 1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253962

TEXAS

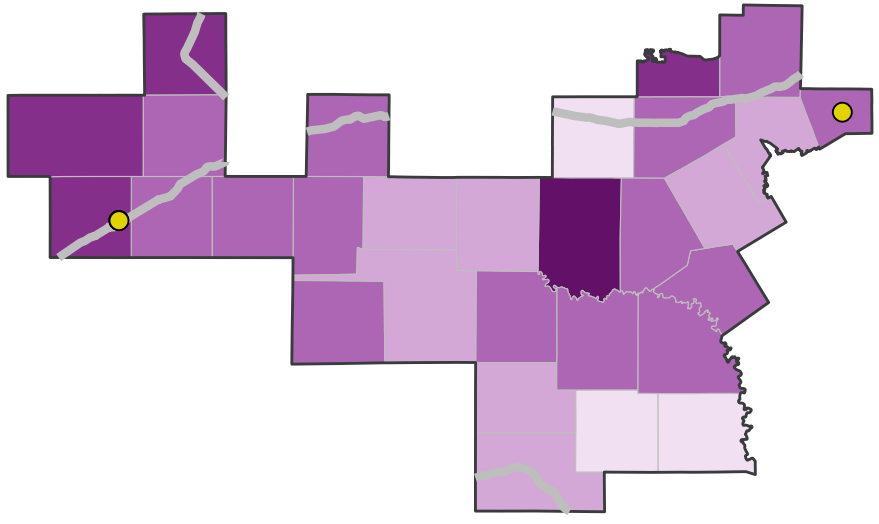
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

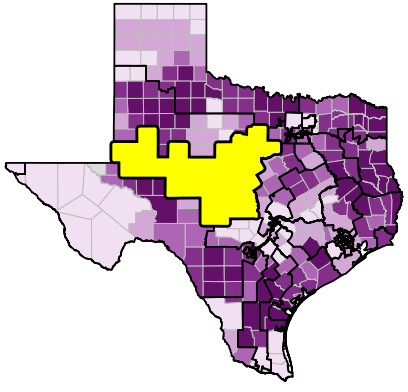
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 11

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

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A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 11

The map for Congressional District 11 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 66 − 103 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 11 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253963

TEXAS

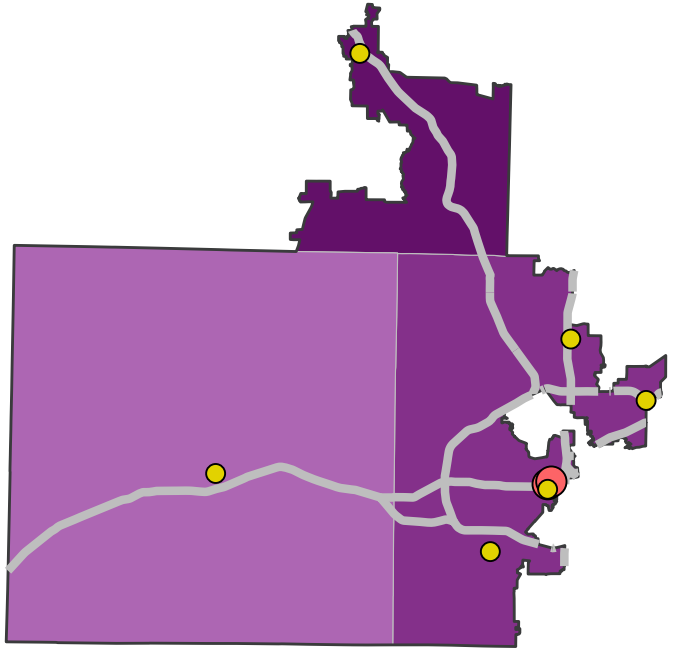
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 12

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

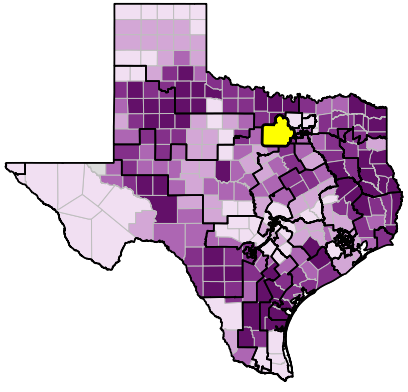
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 12

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 12

The map for Congressional District 12 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 89 − 104 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 12 (6 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253964

TEXAS

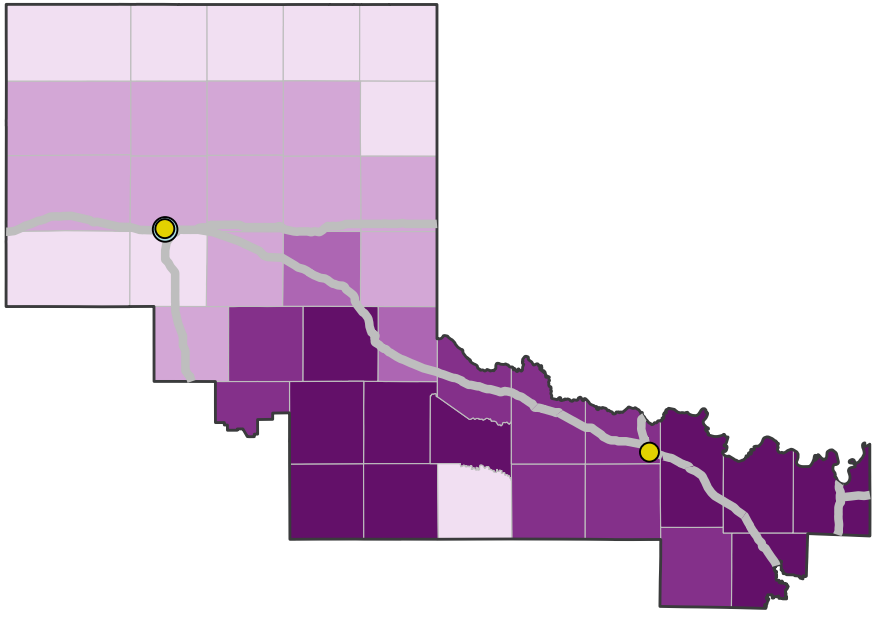
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 13

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

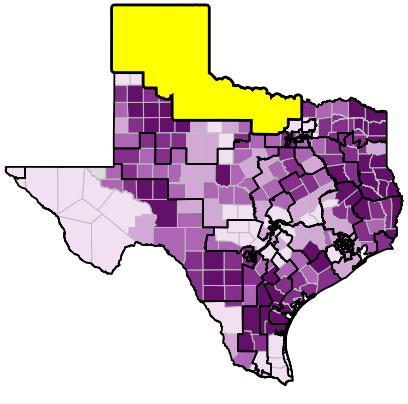
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 13

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 13

The map for Congressional District 13 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 52 − 120 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 13 (2 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253965

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 14

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

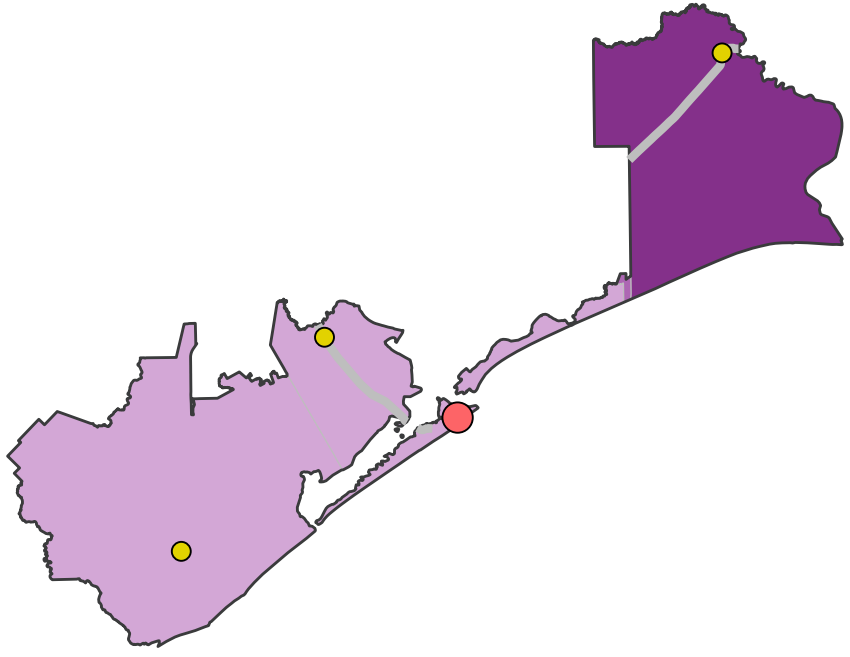
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

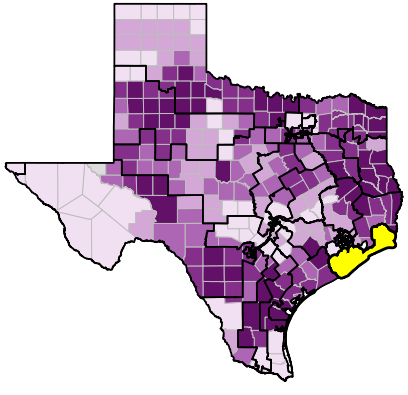
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 14

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 14

The map for Congressional District 14 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 78 − 93 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 14 (3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253966

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 15

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

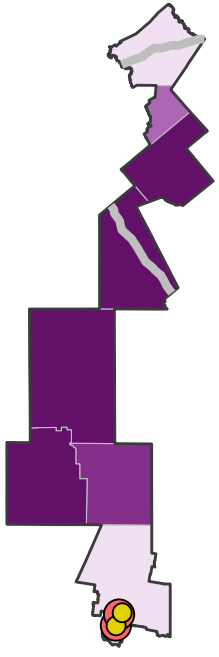
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

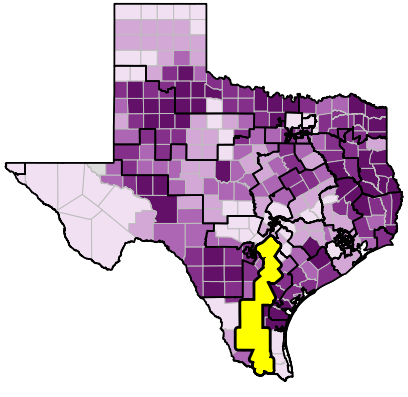
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 15

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 15

The map for Congressional District 15 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 110 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 15 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253967

TEXAS

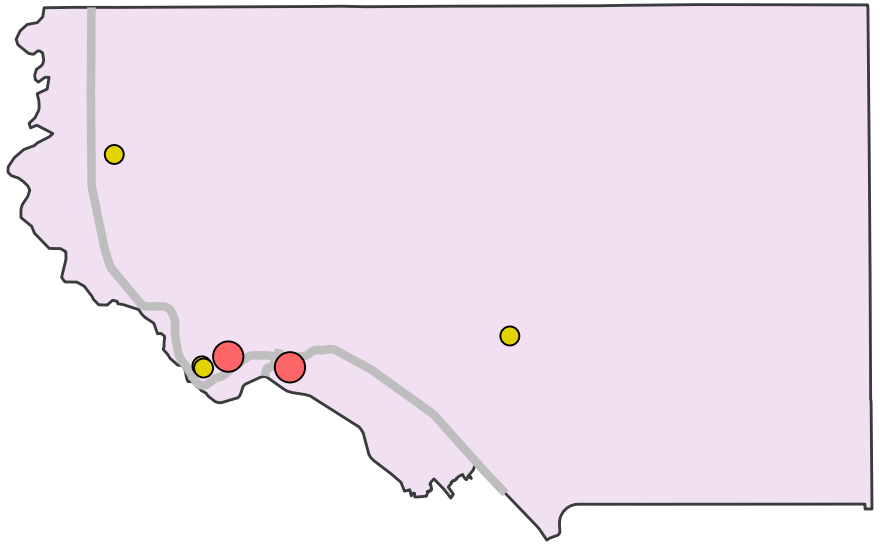
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 16



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

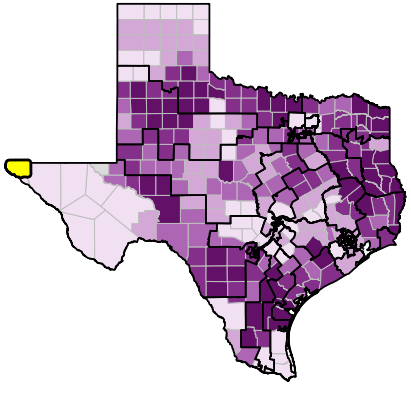
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 16

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 16

The map for Congressional District 16 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for El Paso County, the single county represented in the district, is 57 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 16 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253968

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 17

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

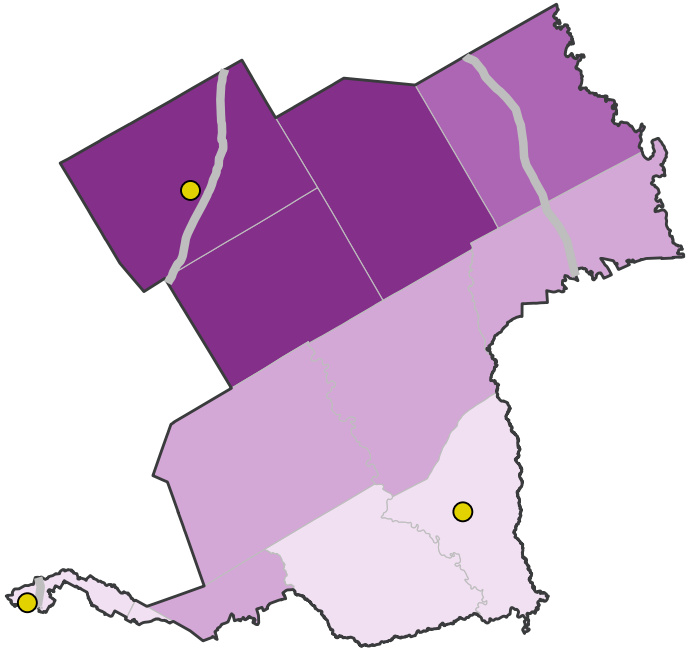
By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

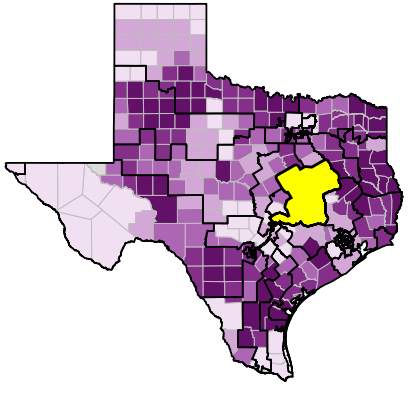
Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 17

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 17

The map for Congressional District 17 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 59 − 96 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 17 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253969

TEXAS

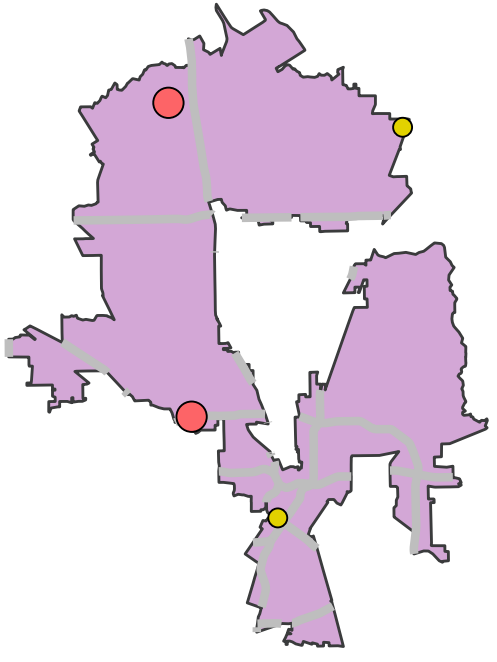
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 18



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

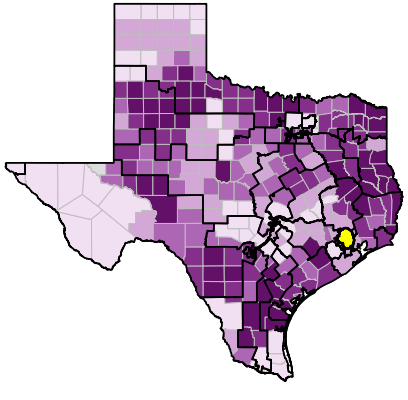
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 18

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 18

The map for Congressional District 18 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Harris County, the single county represented in the district, is 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 18 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253970

TEXAS

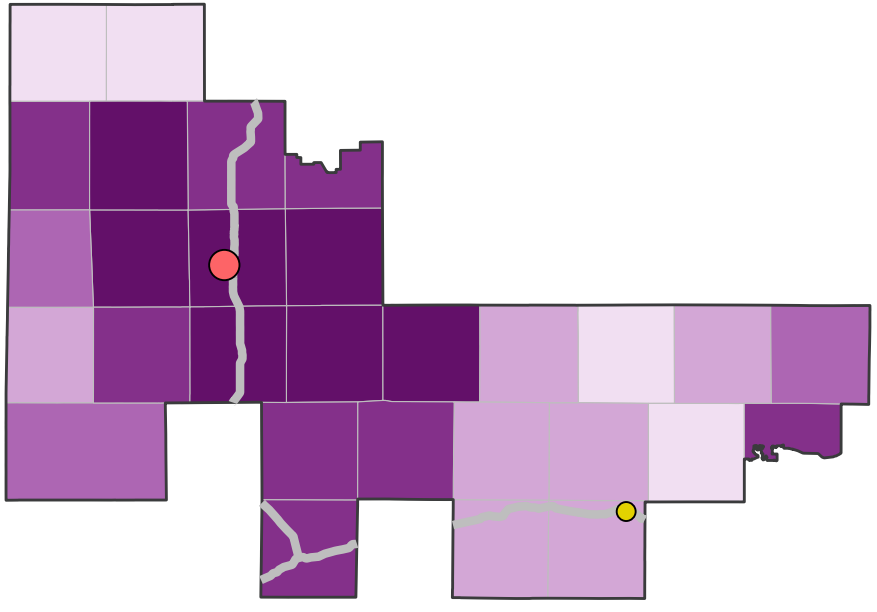
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 19

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

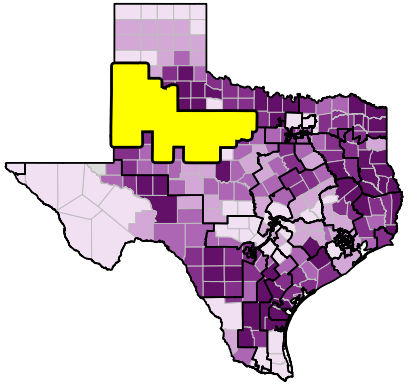
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 19

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 19

The map for Congressional District 19 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 103 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 19 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253971

TEXAS

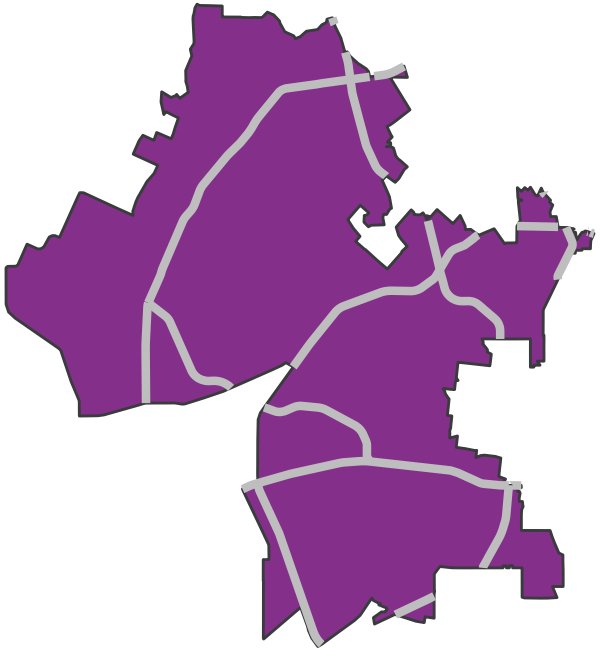
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 20

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

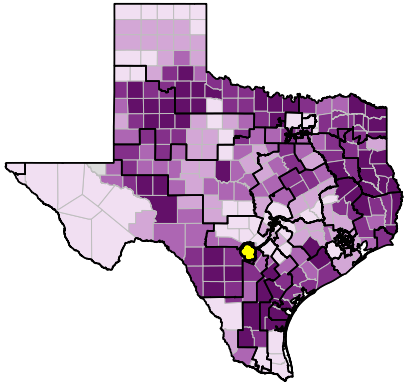
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 20

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 20

The map for Congressional District 20 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Bexar County, the single county represented in the district, is 92 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 20 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253972

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 21

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

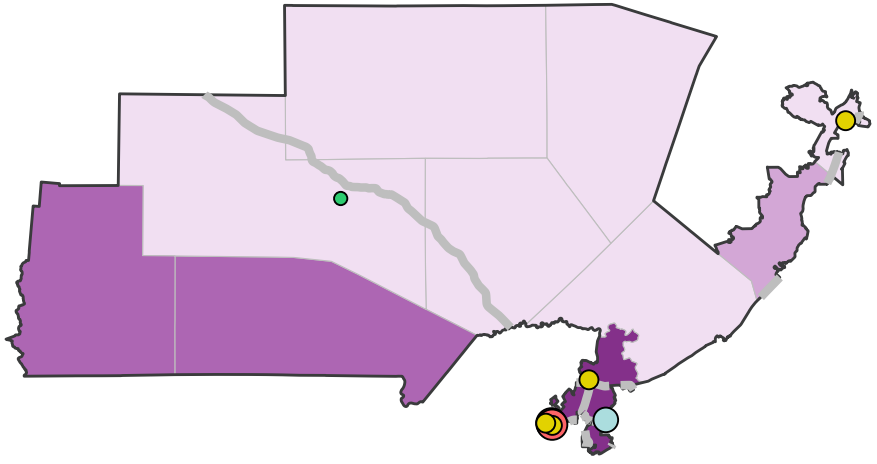
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

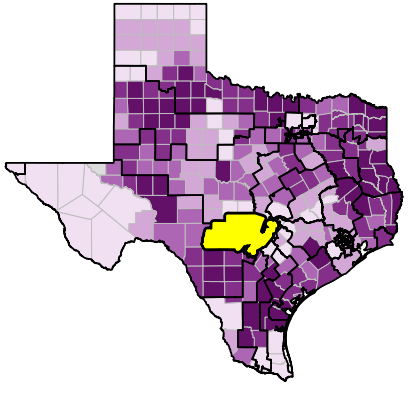
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 21

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 21

The map for Congressional District 21 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 92 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 21 (1 Acute, 4 Primary, 1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253973

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 22

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

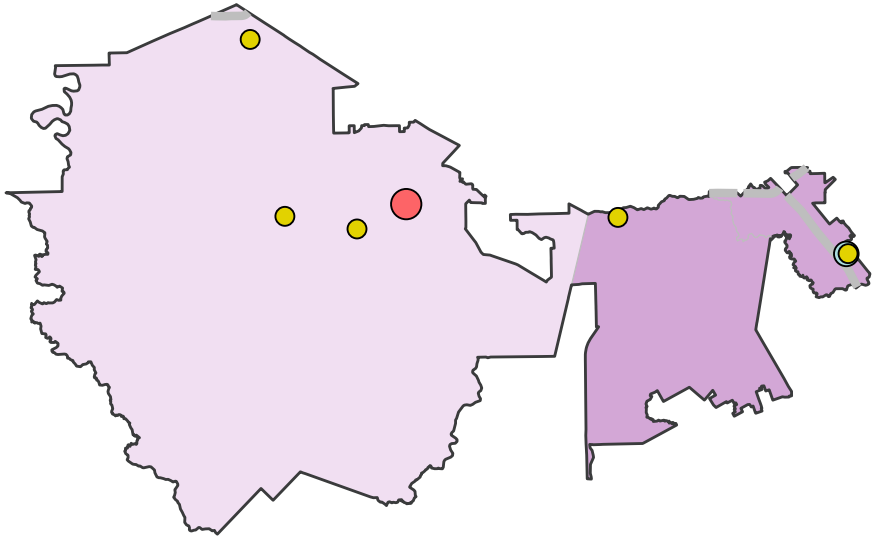
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

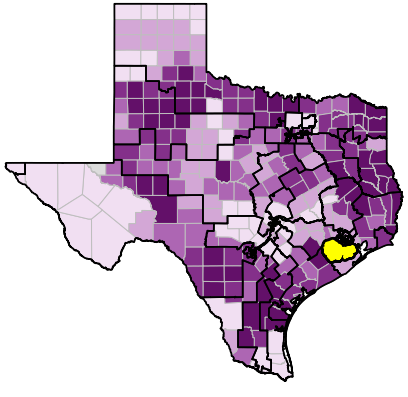
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 22

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 22

The map for Congressional District 22 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 22 (5 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253974

TEXAS

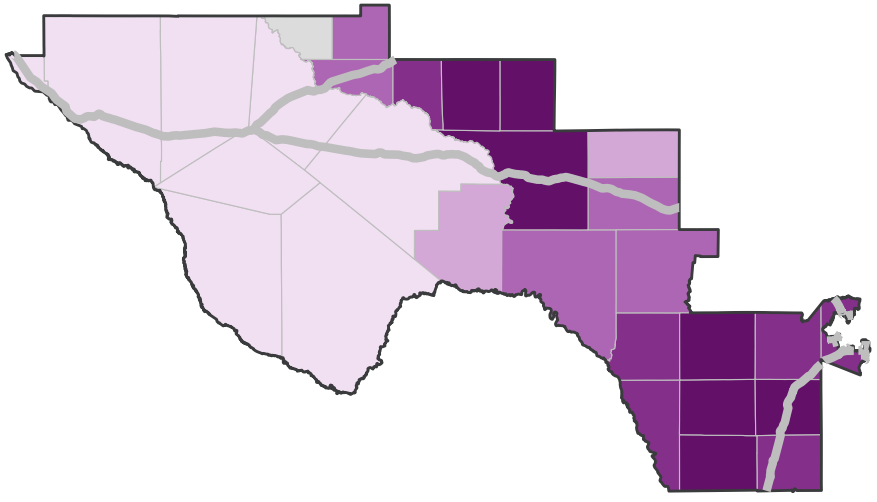
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 23

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

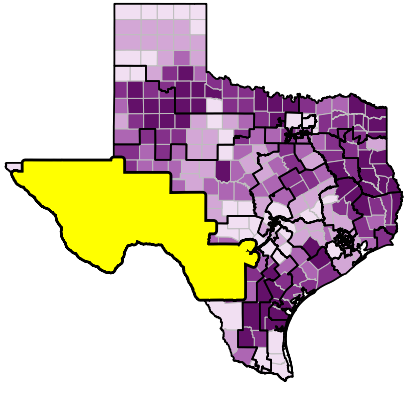
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 23

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 23

The map for Congressional District 23 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 56 − 107 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 23 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253975

TEXAS

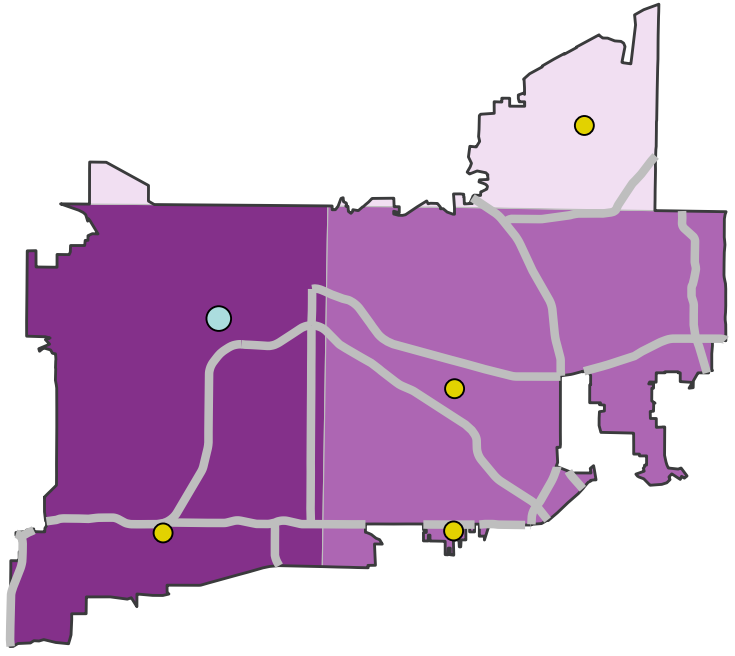
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 24

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

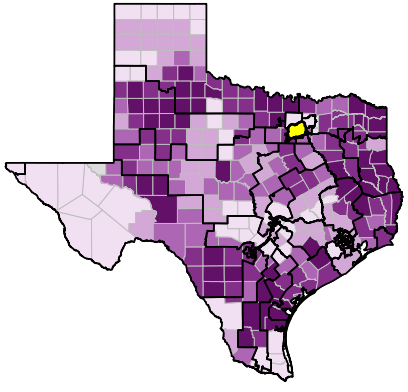
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 24

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 24

The map for Congressional District 24 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 91 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 24 (4 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253976

TEXAS

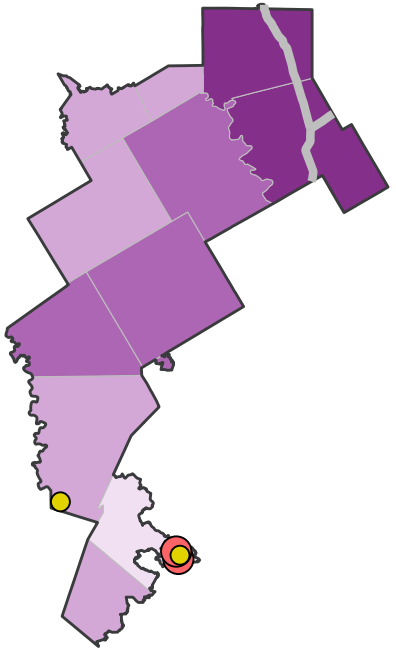
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 25



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

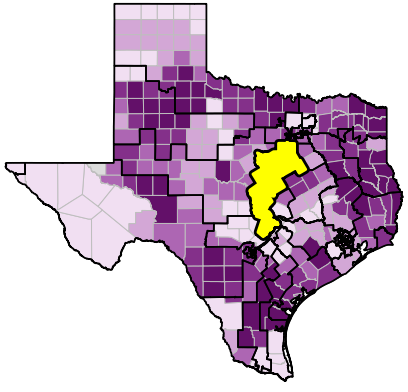
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 25

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 25

The map for Congressional District 25 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 91 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 25 (2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253977

TEXAS

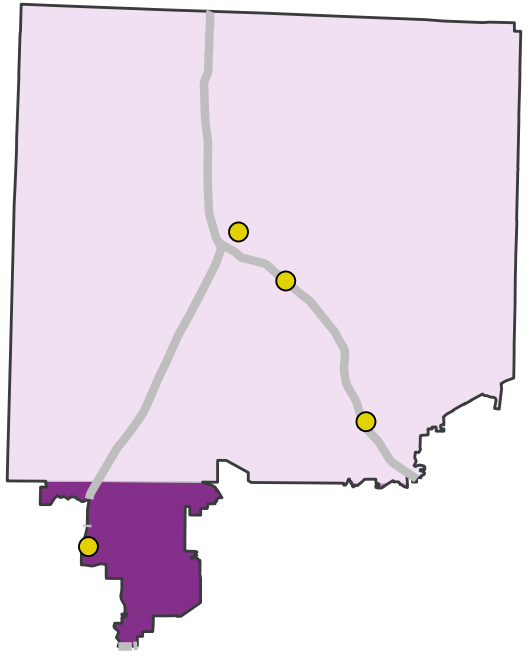
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 26

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

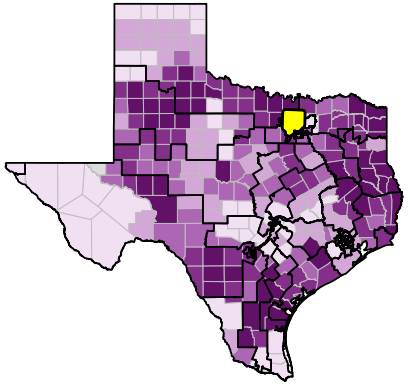
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 26

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 26

The map for Congressional District 26 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 68 − 91 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 26 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253978

TEXAS

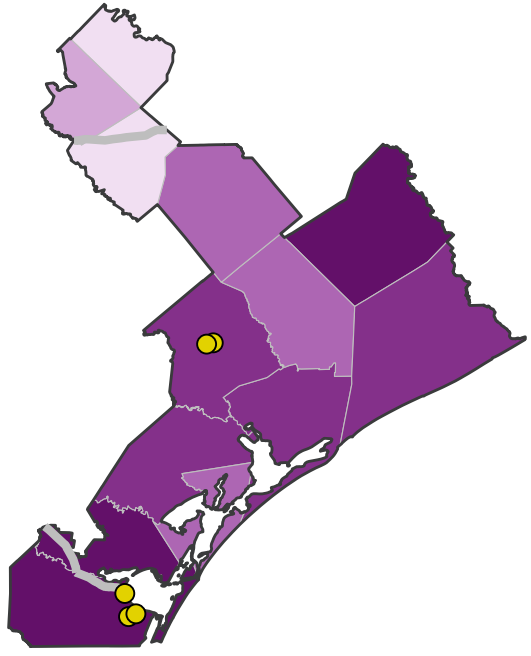
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 27

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

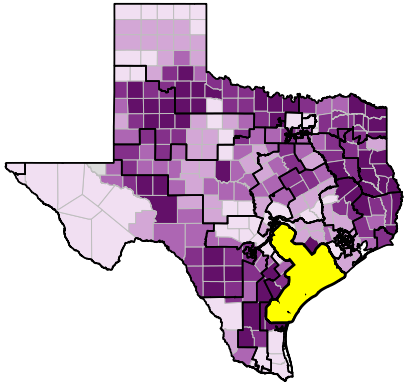
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 27

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 27

The map for Congressional District 27 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 105 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 27 (5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253979

TEXAS

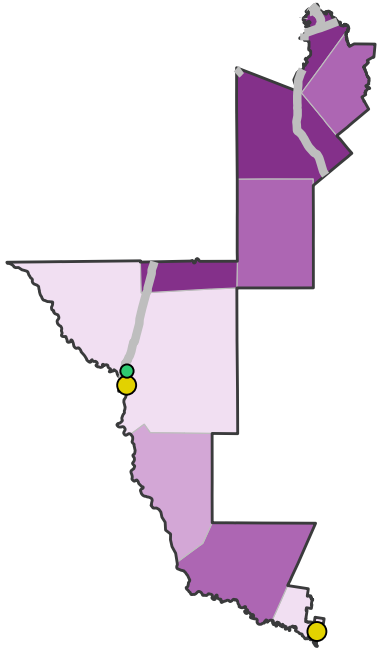
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 28

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

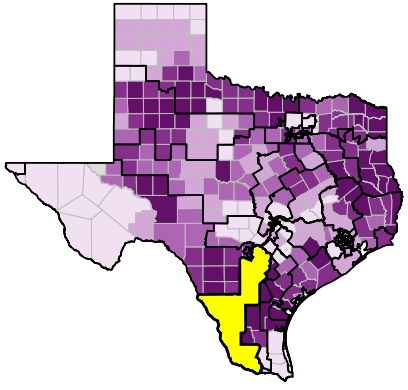
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 28

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 28

The map for Congressional District 28 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 95 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 28 (1 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253980

TEXAS

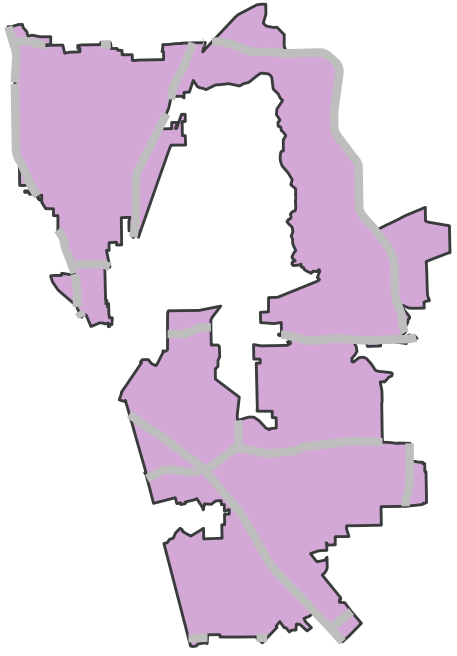
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 29

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

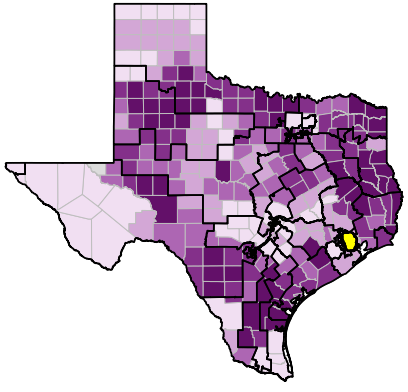
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 29

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 29

The map for Congressional District 29 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Harris County, the single county represented in the district, is 82 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 29 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253981

TEXAS

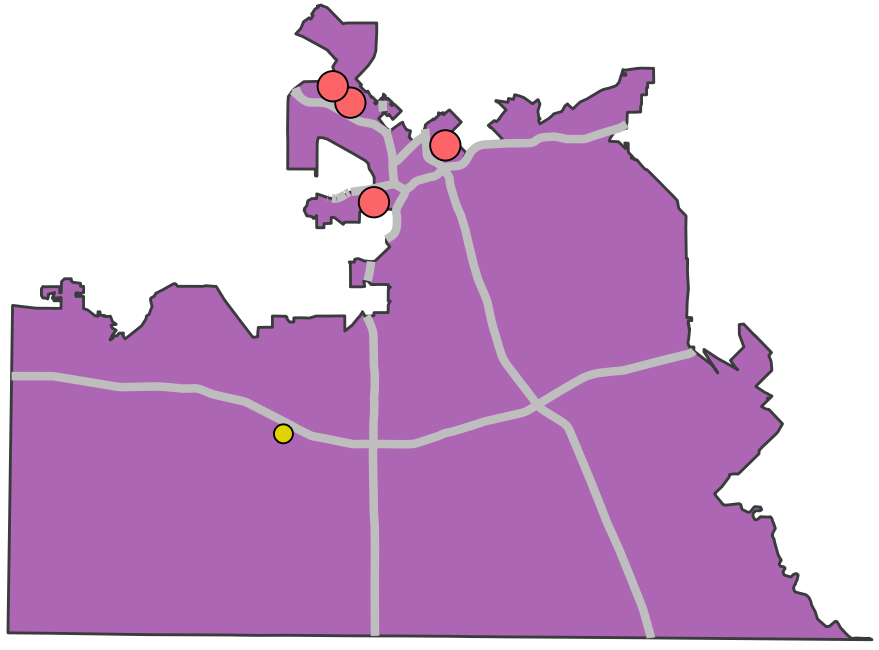
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 30



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

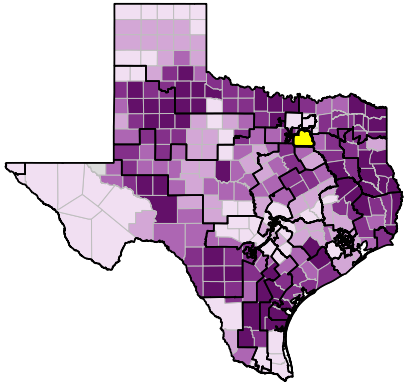
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 30

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 30

The map for Congressional District 30 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for Dallas County, the single county represented in the district, is 86 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 30 (1 Primary, 4 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253982

TEXAS

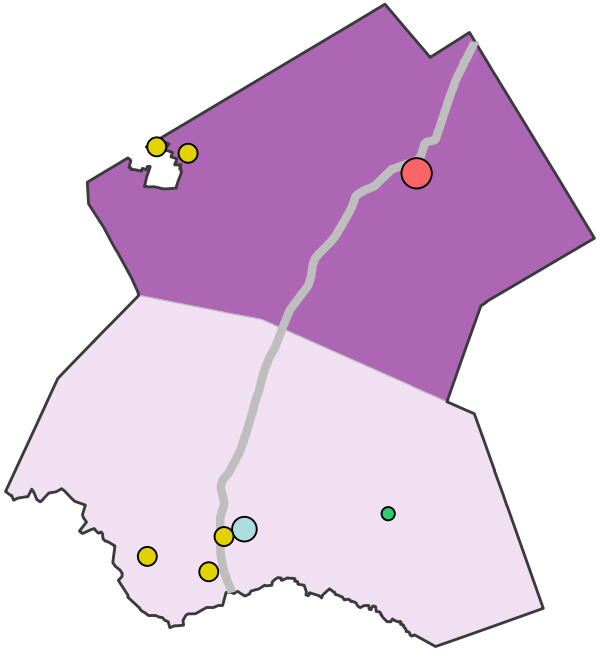
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 31

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

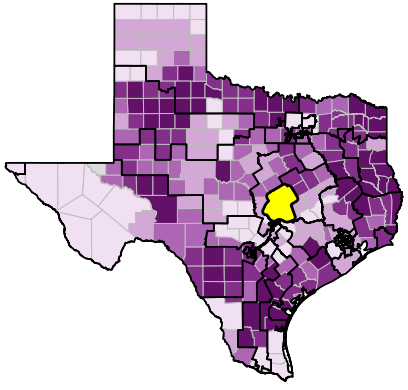
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 31

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 31

The map for Congressional District 31 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 73 − 89 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 31 (1 Acute, 5 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253983

TEXAS

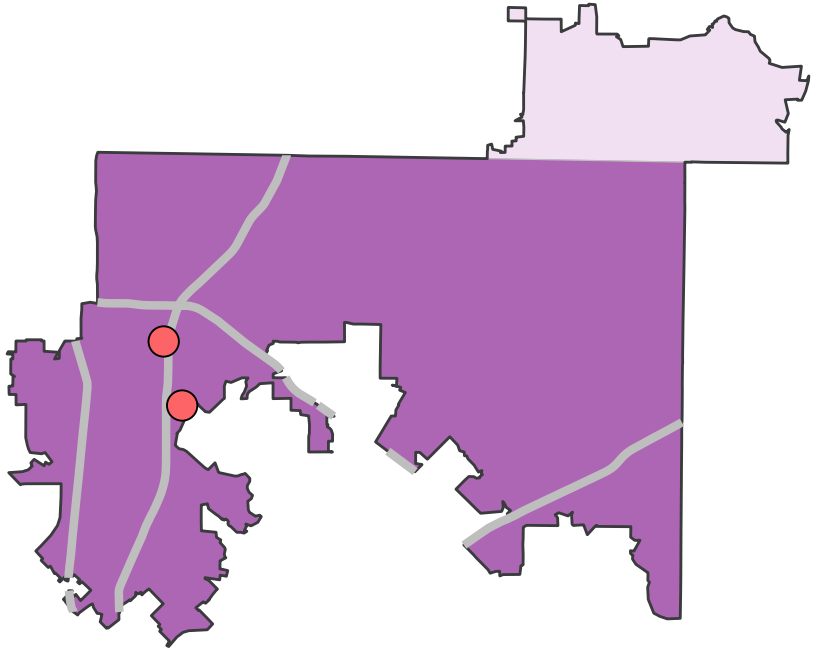
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 32

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

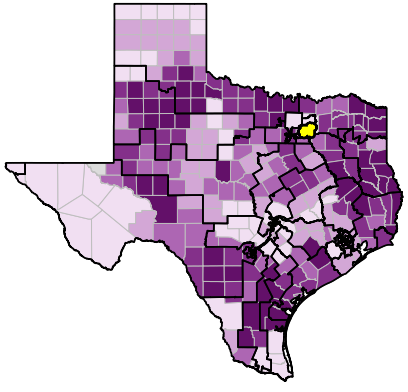
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 32

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 32

The map for Congressional District 32 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 69 − 86 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 32 (2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253984

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 33

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

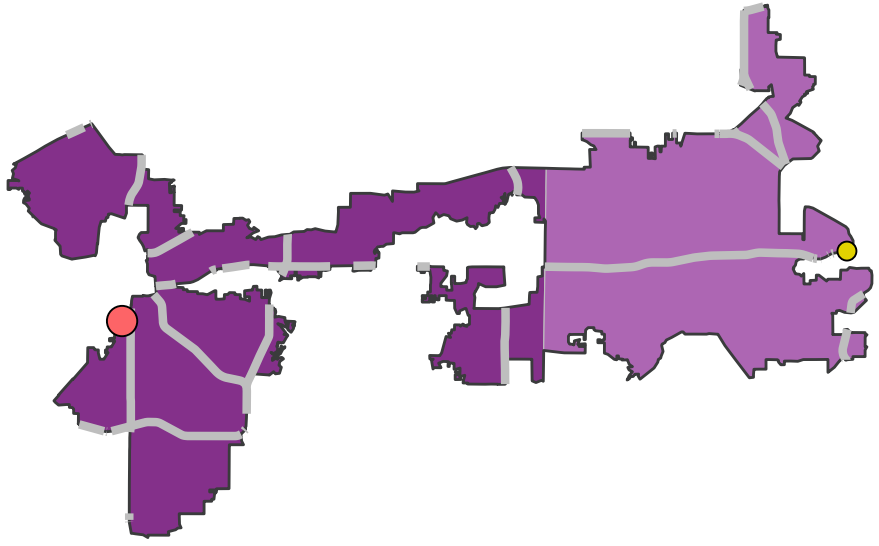
By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

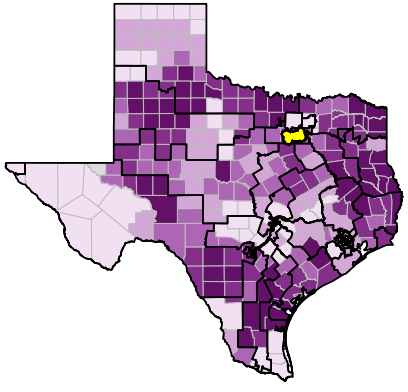
Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH) — Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC) — ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC) — PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC) — TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 33

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 33

The map for Congressional District 33 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 86 − 91 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 33 (1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253985

TEXAS

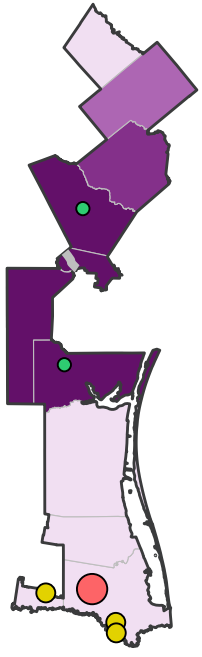
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 34

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

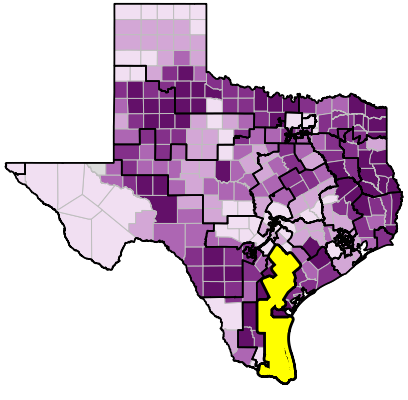
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 34

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 34

The map for Congressional District 34 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 104 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 34 (2 Acute, 3 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253986

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 35

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

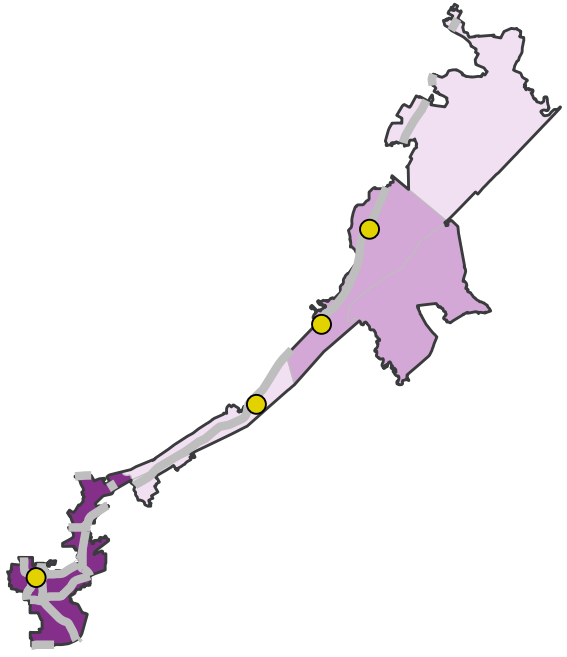
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

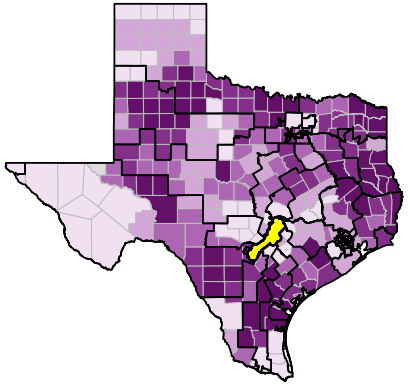
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 35

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 35

The map for Congressional District 35 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 92 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 35 (4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253987

TEXAS

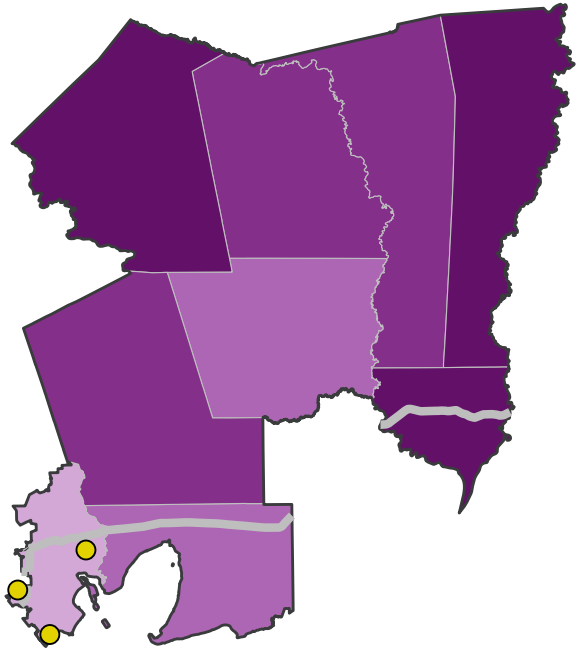
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 36



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

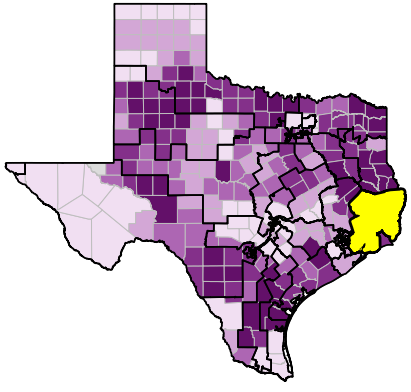
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 36

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 36

The map for Congressional District 36 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 82 − 174 per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 36 (3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253988

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 37

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

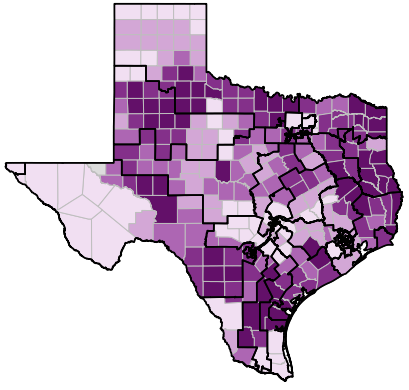
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 37

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 37

The map for Congressional District 37 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 37 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253989

TEXAS

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 38

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 52 − 74
- 74 − 83
- 83 − 90
- 90 − 98
- 98 − 174
- Insufficient Data
- County*

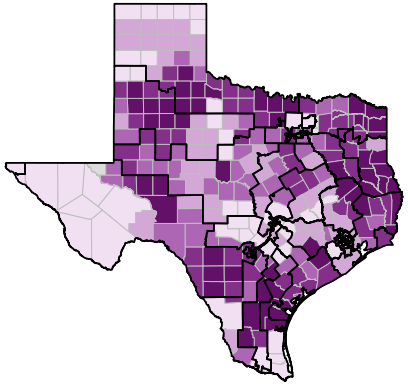
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Texas

87 per 100,000 persons



Congressional District 38

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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TEXAS

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Texas Congressional District 38

The map for Congressional District 38 in Texas shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from Inf − −Inf per 100,000. For Texas and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 0 stroke centers in District 38 (There are no certified stroke centers in this district.).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253990

UTAH

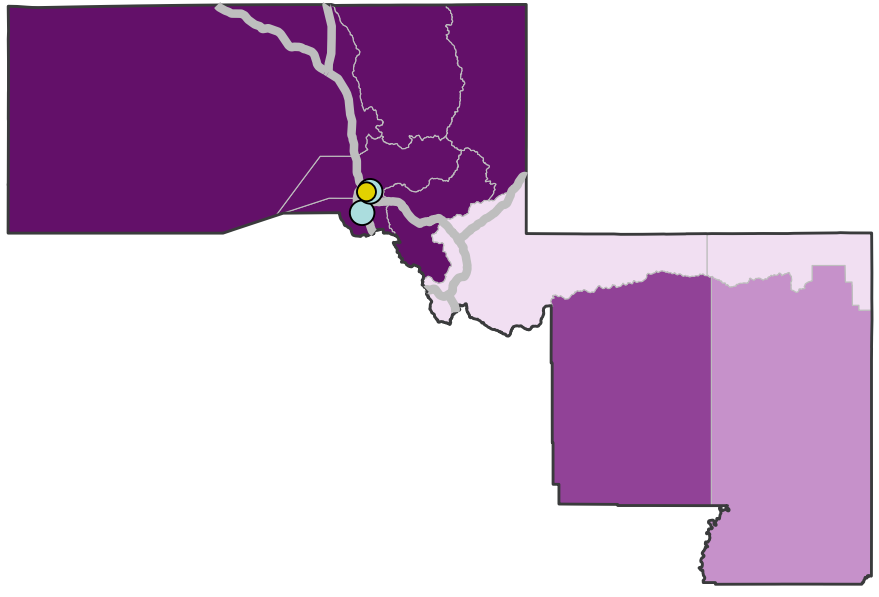
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 60
- 60 − 65
- 65 − 67
- 67 − 73

- County*
- Highway

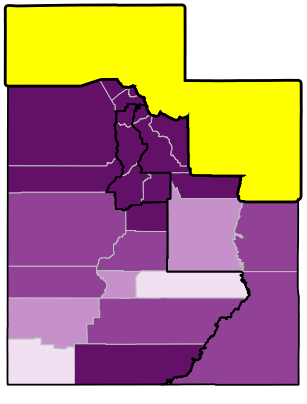
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Utah

64 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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UTAH

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Utah Congressional District 1

The map for Congressional District 1 in Utah shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 53 − 68 per 100,000. For Utah and the United States, stroke death rates are 64 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 1 (1 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253991

UTAH

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 60
- 60 − 65
- 65 − 67
- 67 − 73

- County*
- Highway

Stroke Centers

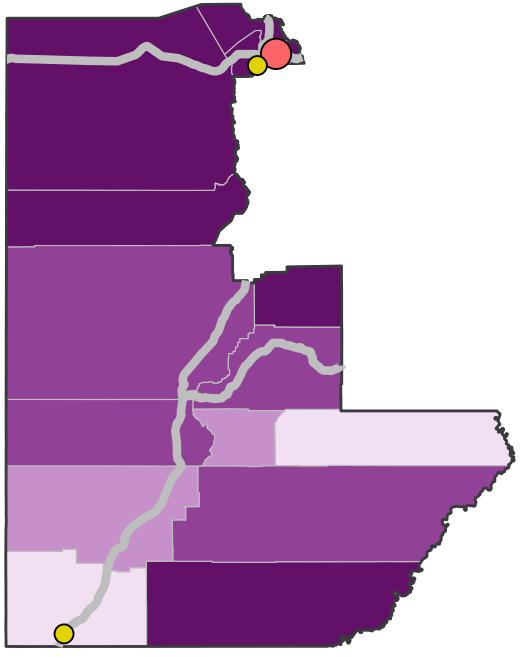
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

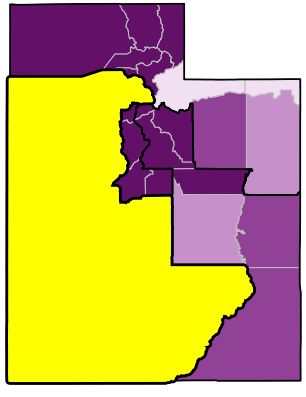
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Utah

64 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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UTAH

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Utah Congressional District 2

The map for Congressional District 2 in Utah shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 73 per 100,000. For Utah and the United States, stroke death rates are 64 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253992

UTAH

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 60
- 60 − 65
- 65 − 67
- 67 − 73

- County*
- Highway

Stroke Centers

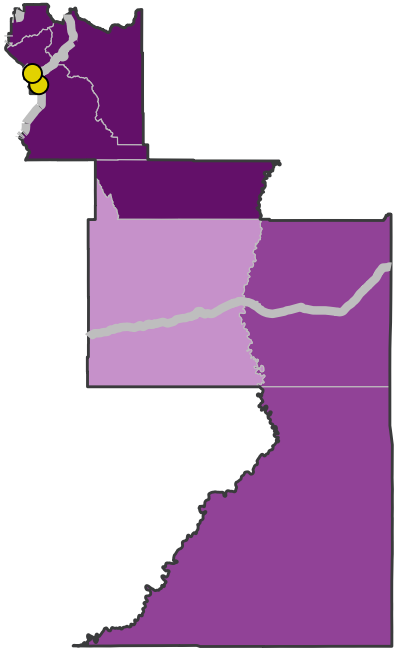
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

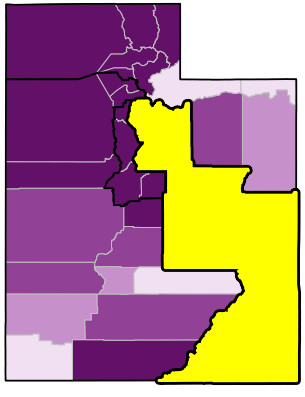
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Utah

64 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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UTAH

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Utah Congressional District 3

The map for Congressional District 3 in Utah shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 68 per 100,000. For Utah and the United States, stroke death rates are 64 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 3 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253993

UTAH

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 60
- 60 − 65
- 65 − 67
- 67 − 73

- County*
- Highway

Stroke Centers

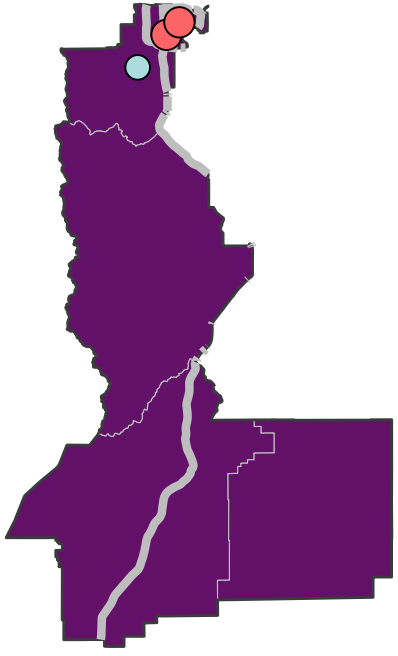
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

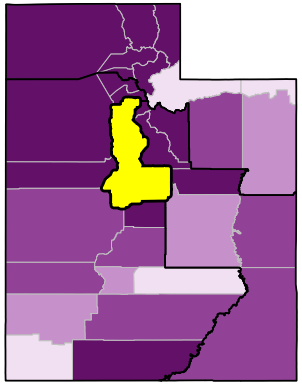
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Utah

64 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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UTAH

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Utah Congressional District 4

The map for Congressional District 4 in Utah shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 67 − 68 per 100,000. For Utah and the United States, stroke death rates are 64 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 4 (1 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253994

VERMONT

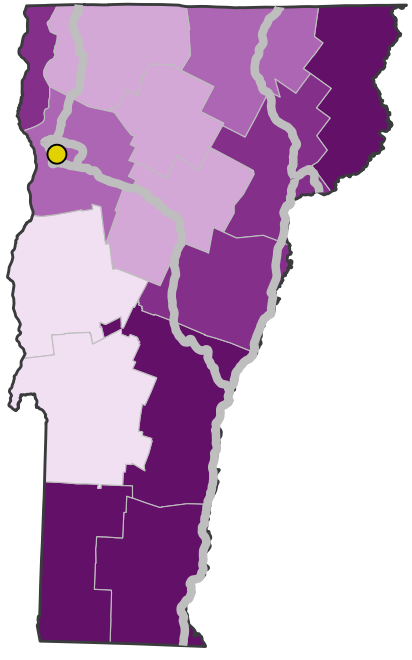
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 50
- 50 − 52
- 52 − 54
- 54 − 60
- 60 − 72

- County*
- Highlight

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Vermont

56 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VERMONT

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Vermont Congressional District 1

The map for Congressional District 1 in Vermont shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 72 per 100,000. For Vermont and the United States, stroke death rates are 56 and 80 per 100,000, respectively.

There is only 1 stroke center in District 1 (1 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253995

VIRGINIA

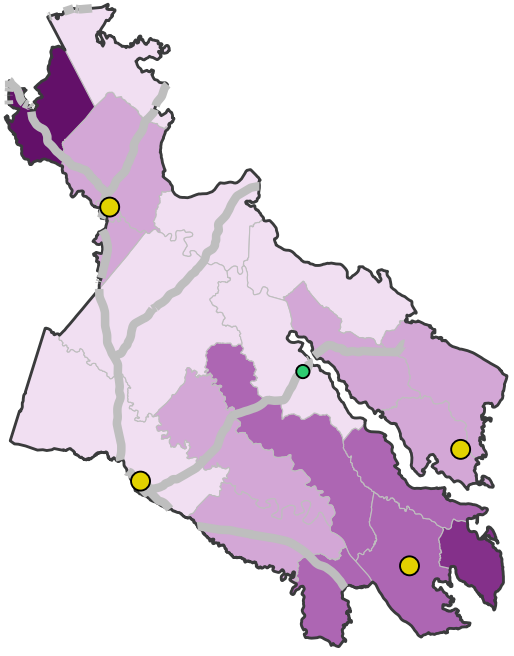
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

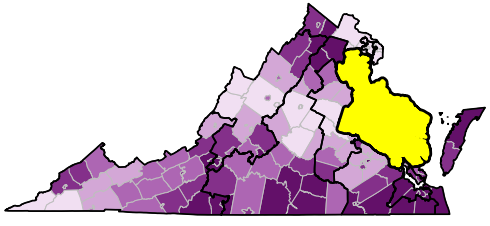
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 1

The map for Congressional District 1 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 108 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 1 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253996

VIRGINIA

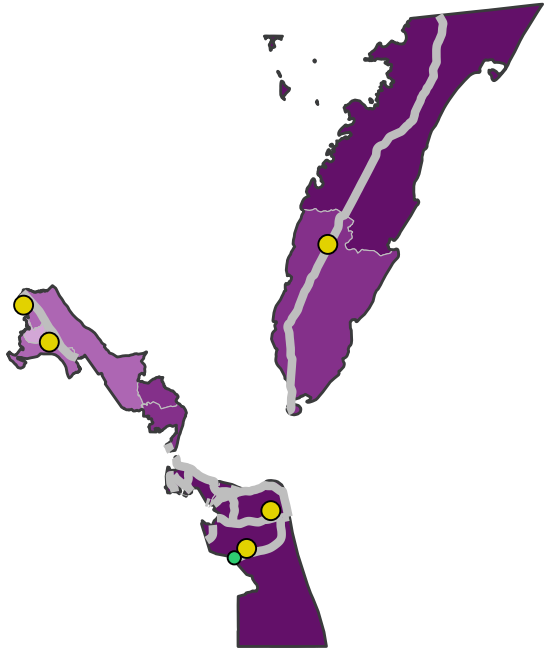
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 2



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182
- County*
- Highway

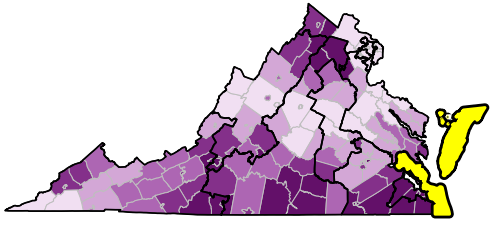
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 2

The map for Congressional District 2 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 76 − 105 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 2 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253997

VIRGINIA

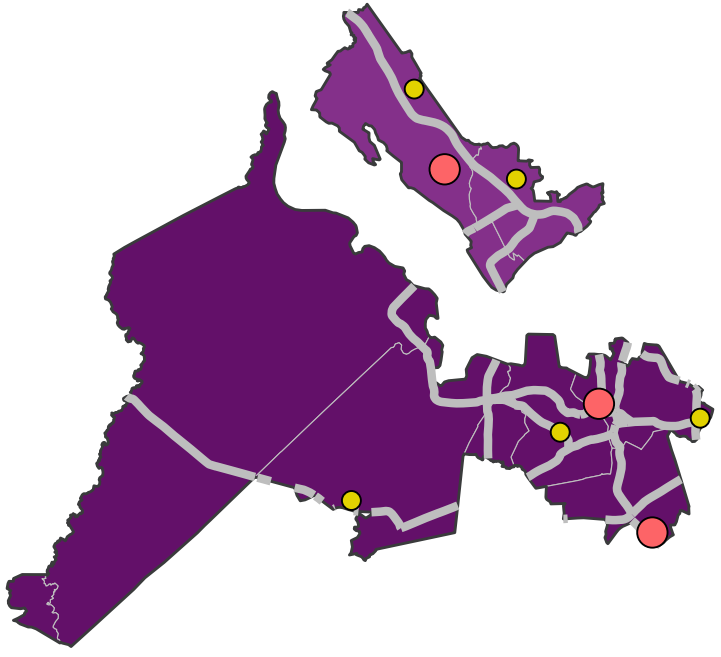
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

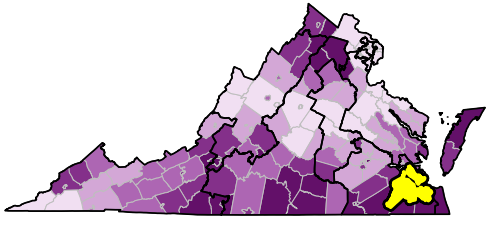
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 3

The map for Congressional District 3 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 94 − 150 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 3 (5 Primary, 3 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253998

VIRGINIA

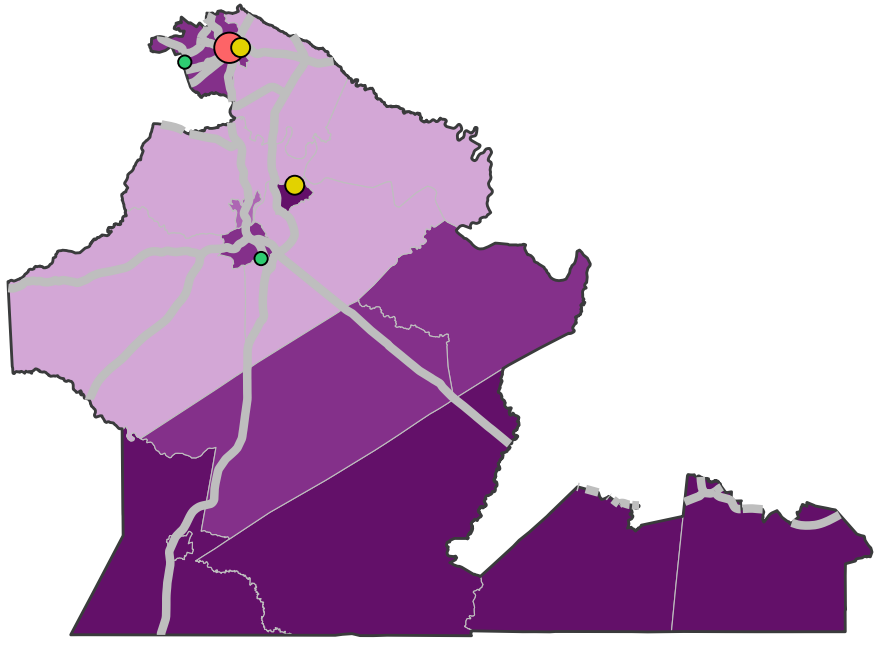
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

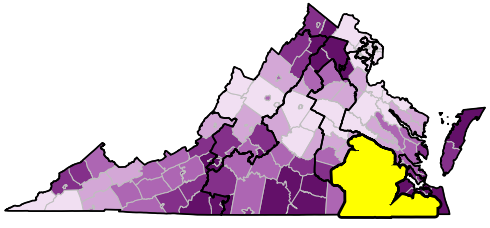
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 4

The map for Congressional District 4 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 175 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 4 (2 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/253999

VIRGINIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

Stroke Centers

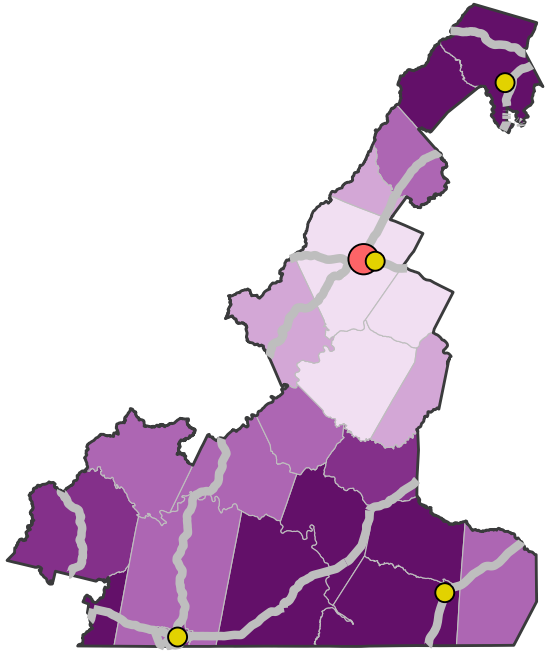
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

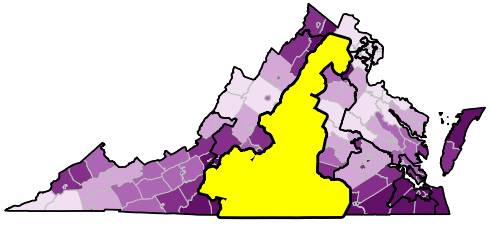
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 5

The map for Congressional District 5 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 61 − 116 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 5 (4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254000

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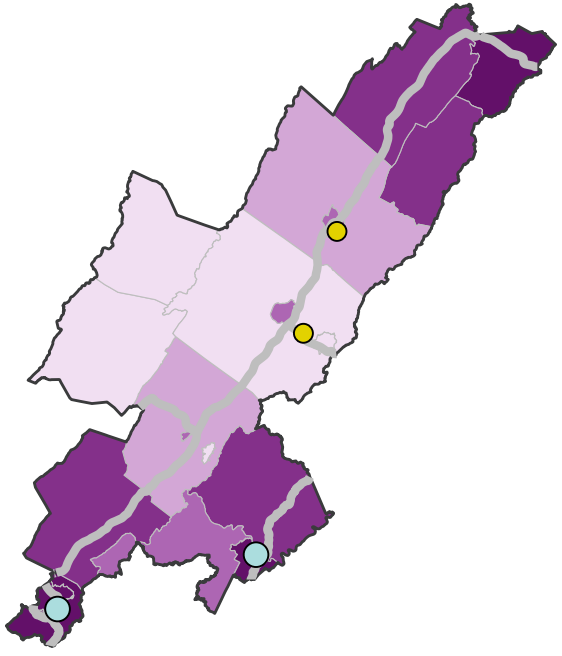
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 6



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

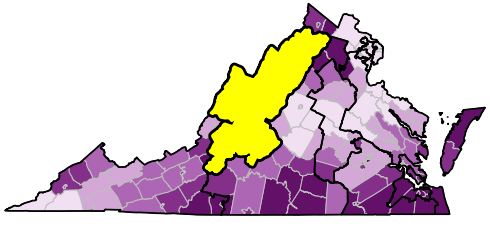
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 6

The map for Congressional District 6 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 59 − 107 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 6 (2 Primary, 2 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254001

VIRGINIA

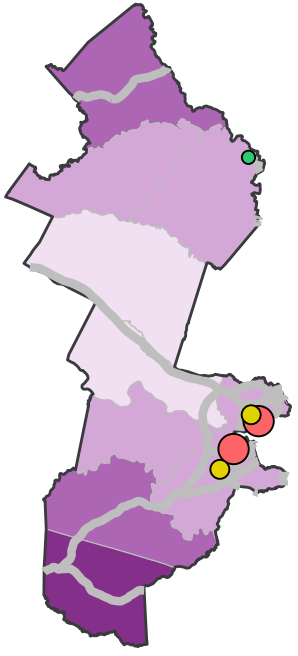
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

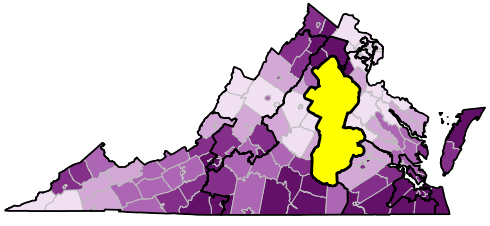
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 7

The map for Congressional District 7 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 92 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 7 (1 Acute, 2 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254002

VIRGINIA

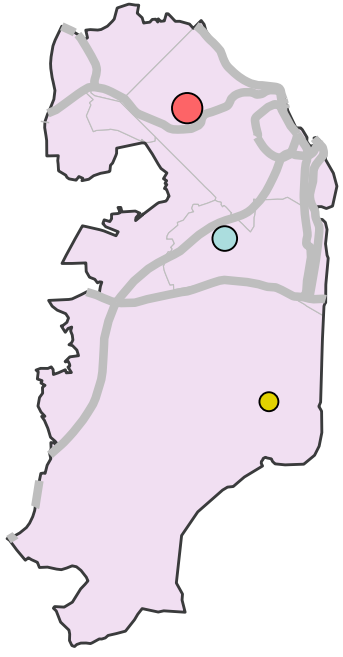
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

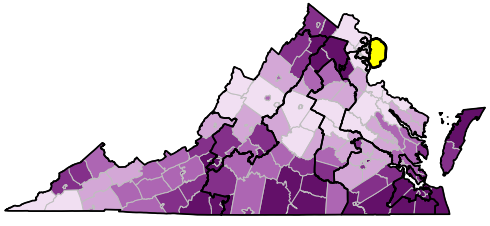
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 8

The map for Congressional District 8 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 51 − 63 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 8 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254003

VIRGINIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182

- County*
- Highway

Stroke Centers

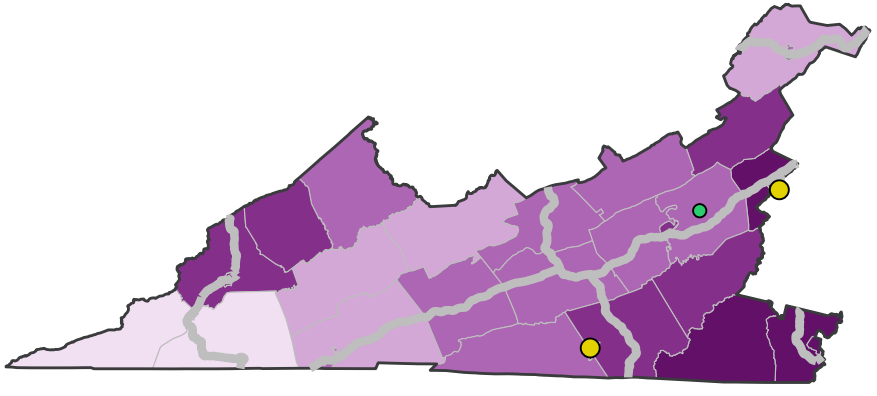
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

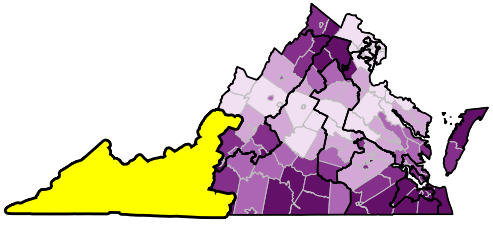
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 9

The map for Congressional District 9 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 182 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 9 (1 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254004

VIRGINIA

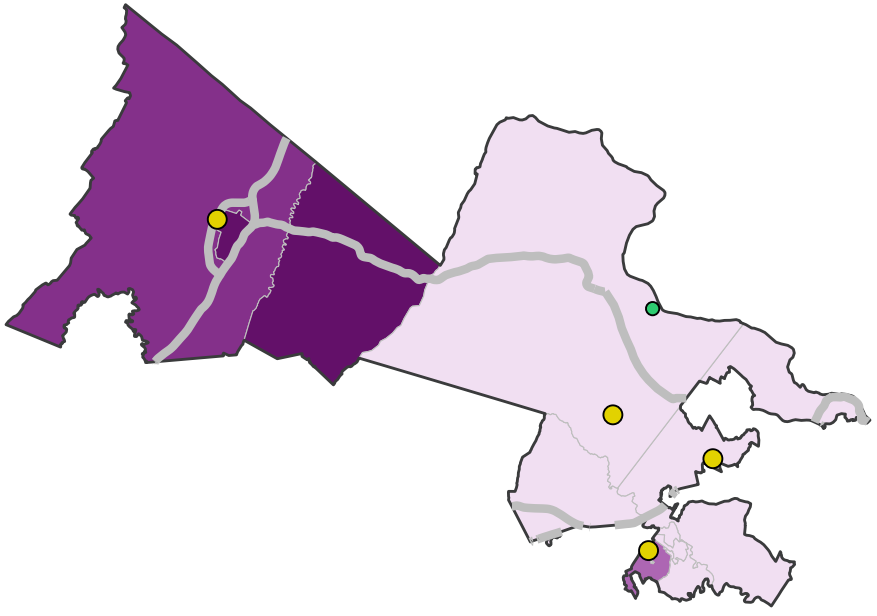
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182
- County*
- Highway

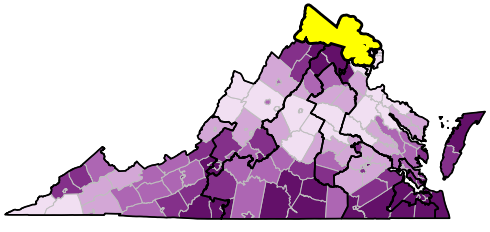
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 10

The map for Congressional District 10 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 47 − 120 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 10 (1 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254005

VIRGINIA

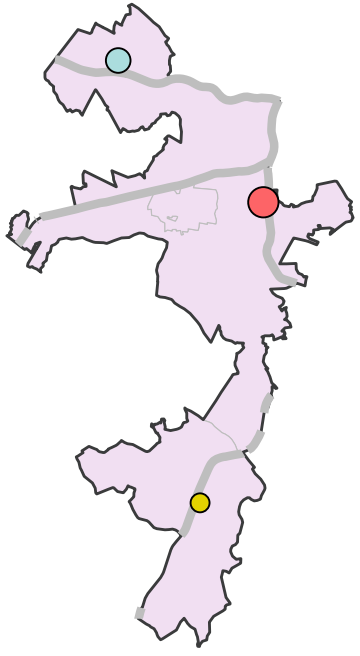
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 11

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 47 − 70
- 70 − 80
- 80 − 89
- 89 − 100
- 100 − 182
- County*
- Highway

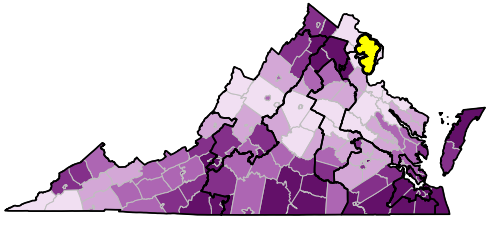
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Virginia

87 per 100,000 persons



Congressional District 11

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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FOR MORE MAPS

VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Virginia Congressional District 11

The map for Congressional District 11 in Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 63 per 100,000. For Virginia and the United States, stroke death rates are 87 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 11 (1 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254006

WASHINGTON

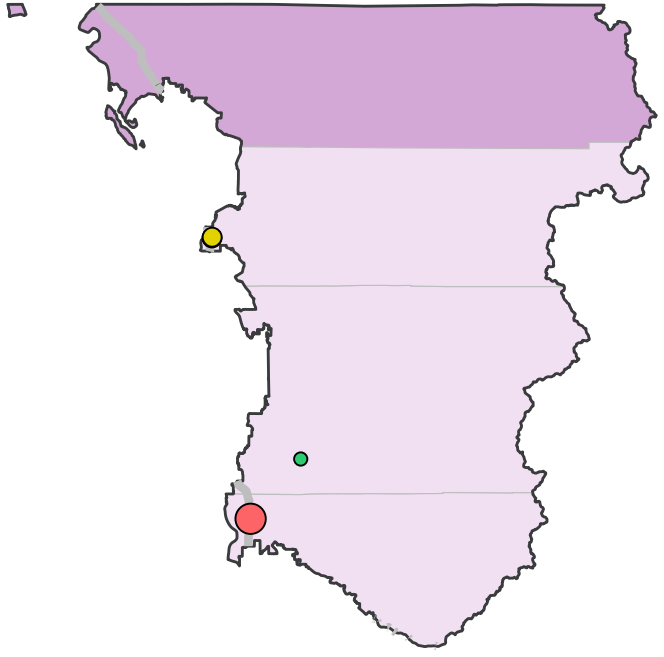
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

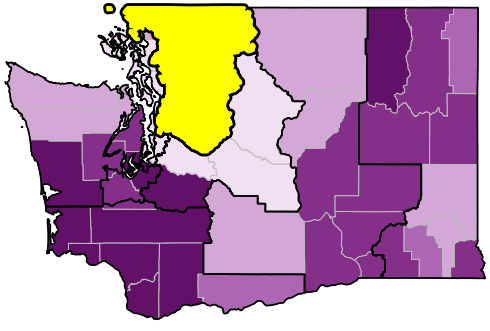
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 1

The map for Congressional District 1 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 64 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 1 (1 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254007

WASHINGTON

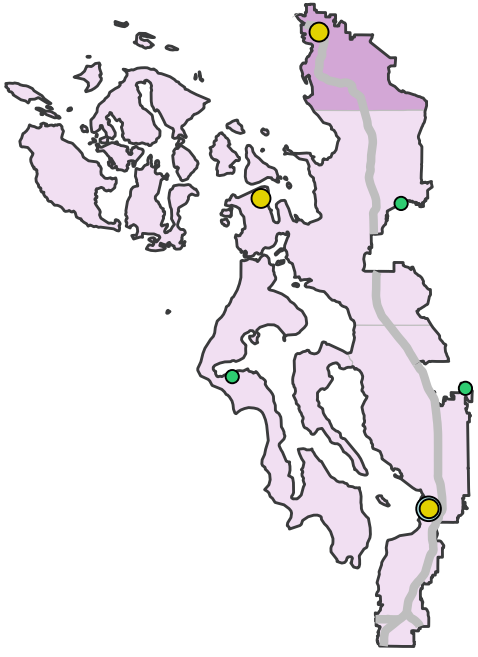
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

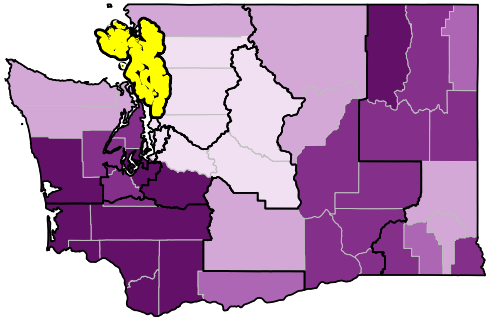
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 2

The map for Congressional District 2 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 54 − 64 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 2 (3 Acute, 3 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254008

WASHINGTON

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

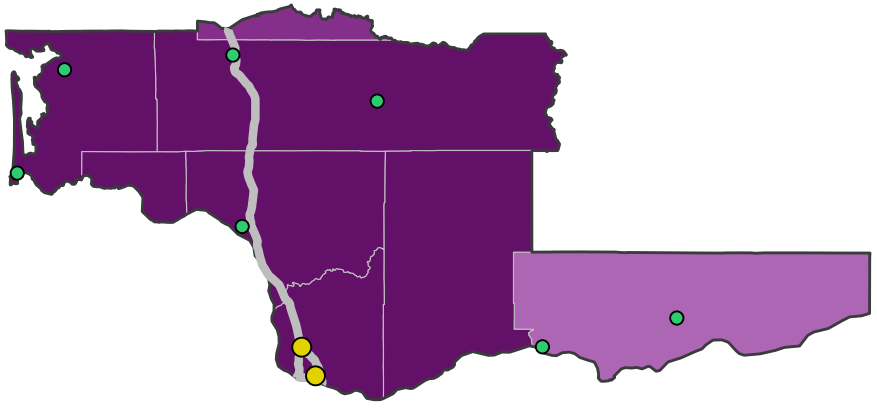
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

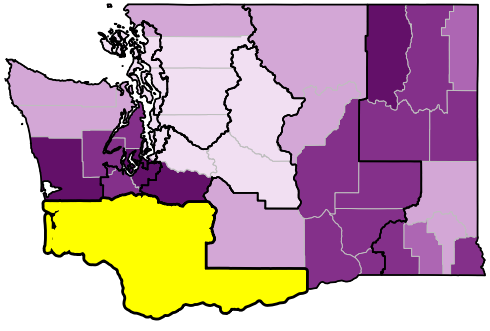
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WASHINGTON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 3

The map for Congressional District 3 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 118 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 3 (7 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254009

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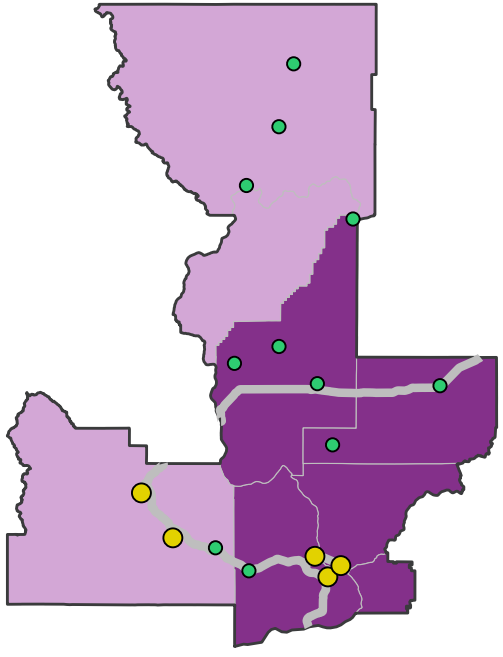
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 4



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

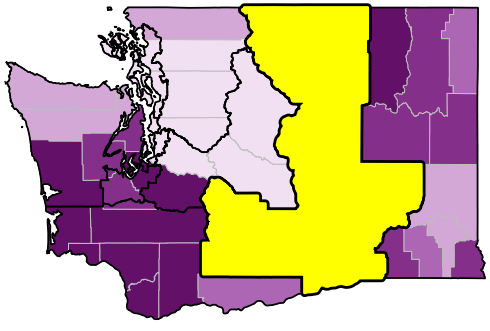
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 4

The map for Congressional District 4 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 75 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 16 stroke centers in District 4 (11 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254010

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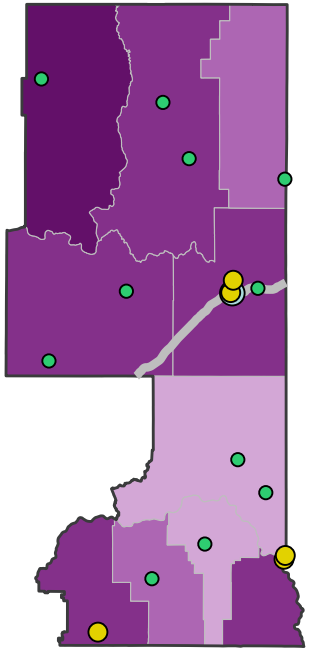
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

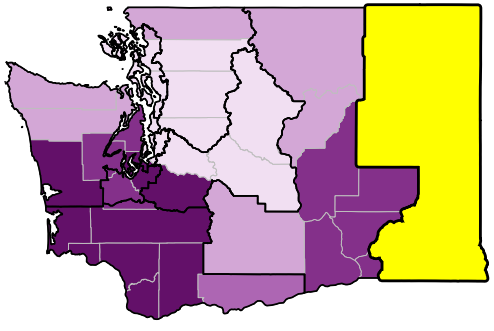
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 5

The map for Congressional District 5 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 65 − 86 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 17 stroke centers in District 5 (11 Acute, 5 Primary, 1 Thrombectomy).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254011

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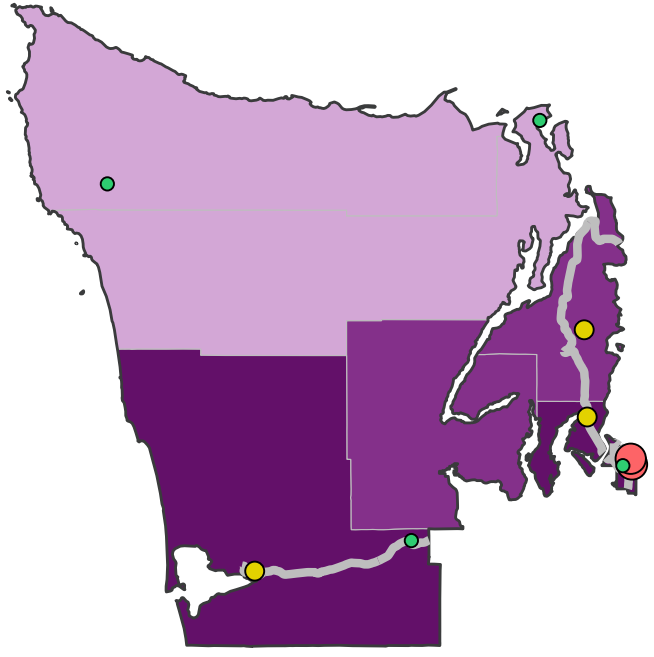
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

County*
Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

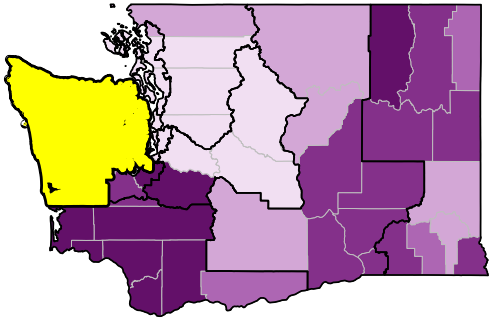
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 6

The map for Congressional District 6 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 64 − 94 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 6 (4 Acute, 3 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254012

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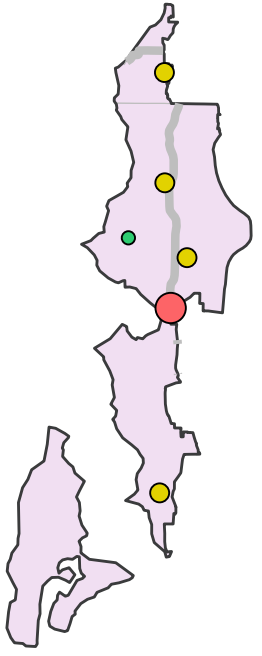
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

DISTRICT 7



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

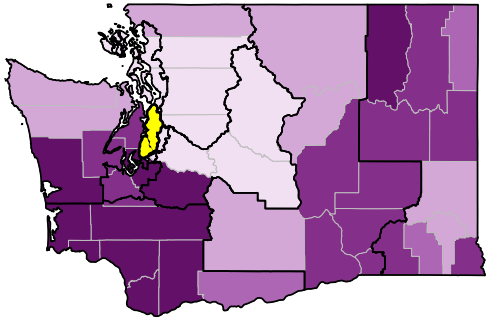
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 7

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 7

The map for Congressional District 7 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 60 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 7 (1 Acute, 4 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254013

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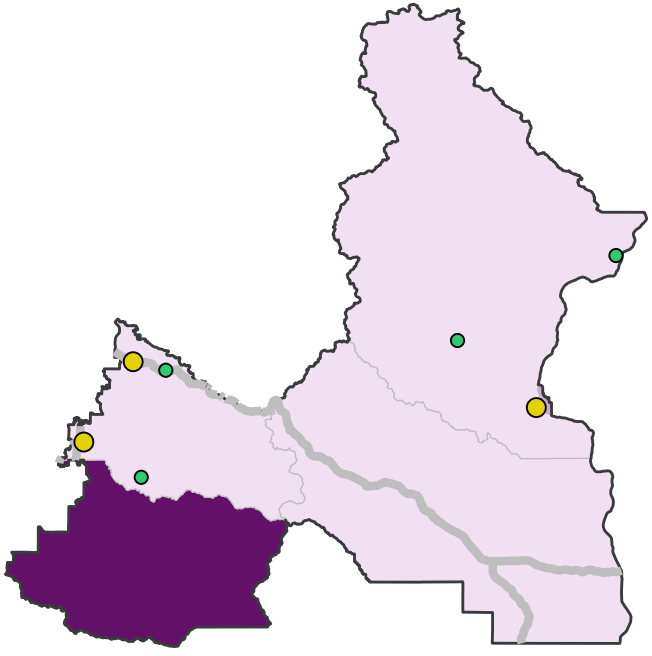
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

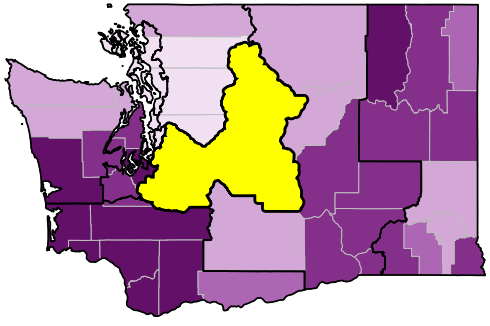
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 8

The map for Congressional District 8 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 94 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 7 stroke centers in District 8 (4 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254014

WASHINGTON

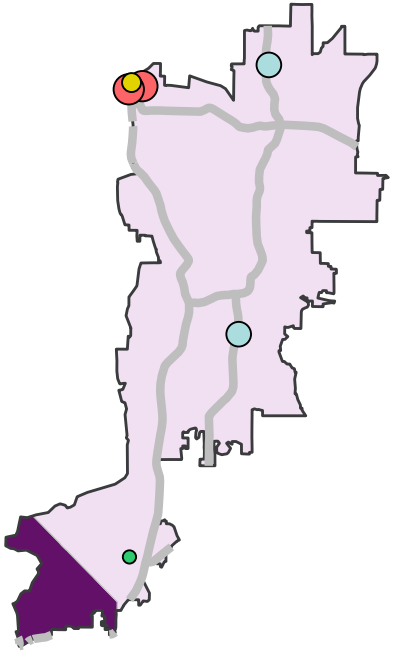
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 9

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

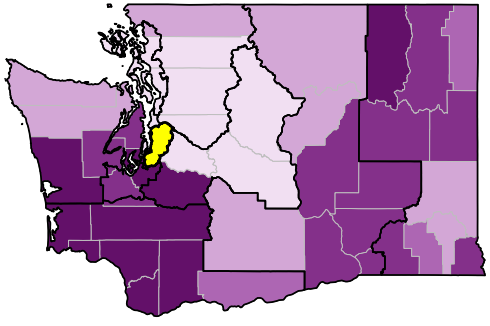
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 9

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WASHINGTON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 9

The map for Congressional District 9 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 94 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 9 (1 Acute, 1 Primary, 2 Thrombectomy, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254015

WASHINGTON

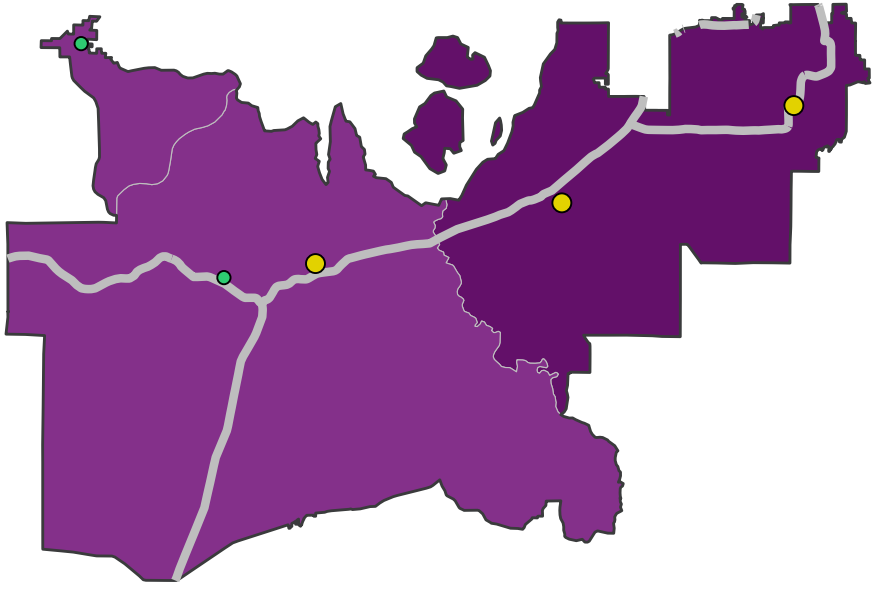
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 10

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 54 − 64
- 64 − 69
- 69 − 72
- 72 − 80
- 80 − 118

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

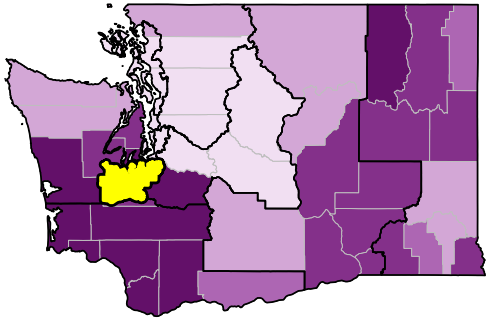
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Washington

73 per 100,000 persons



Congressional District 10

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WASHINGTON

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Washington Congressional District 10

The map for Congressional District 10 in Washington shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 72 − 94 per 100,000. For Washington and the United States, stroke death rates are 73 and 80 per 100,000, respectively.

There are a total of 5 stroke centers in District 10 (2 Acute, 3 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254016

WEST VIRGINIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 67
- 67 − 74
- 74 − 81
- 81 − 89
- 89 − 109

- County*
- Highway

Stroke Centers

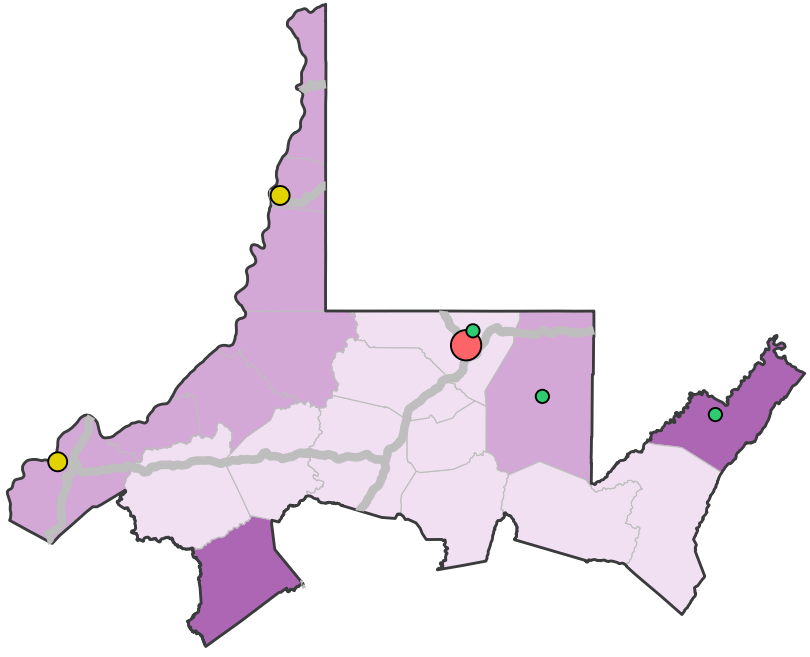
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

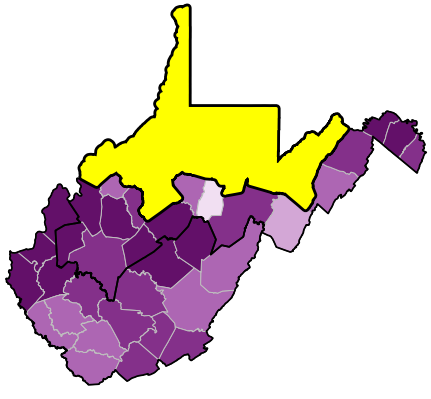
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | West Virginia

79 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WEST VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: West Virginia Congressional District 1

The map for Congressional District 1 in West Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 62 − 76 per 100,000. For West Virginia and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 1 (3 Acute, 2 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254017

WEST VIRGINIA

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 62 − 67
- 67 − 74
- 74 − 81
- 81 − 89
- 89 − 109

County*
Highway

Stroke Centers

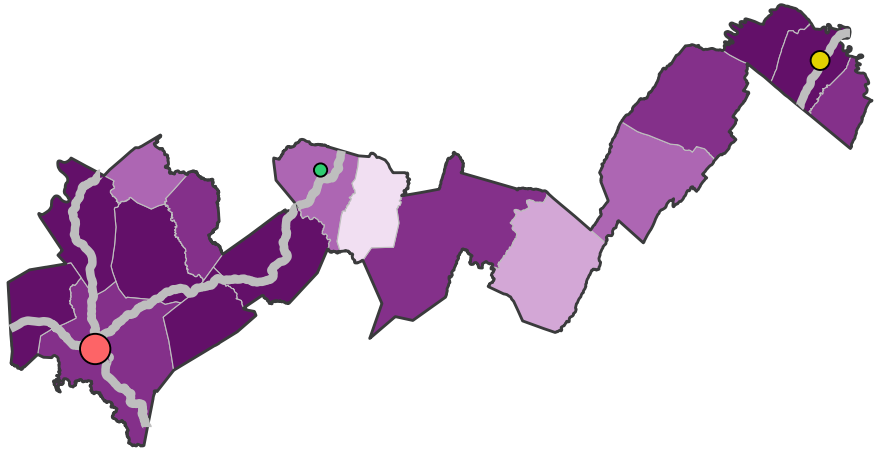
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

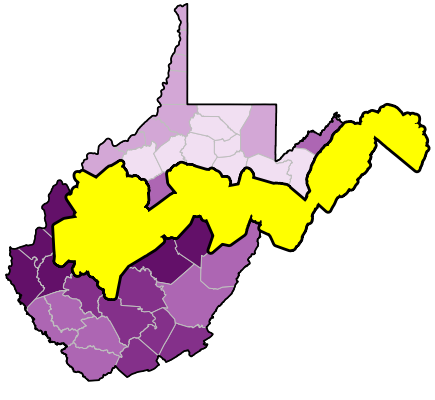
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | West Virginia

79 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WEST VIRGINIA

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: West Virginia Congressional District 2

The map for Congressional District 2 in West Virginia shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 63 − 103 per 100,000. For West Virginia and the United States, stroke death rates are 79 and 80 per 100,000, respectively.

There are a total of 3 stroke centers in District 2 (1 Acute, 1 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254018

WISCONSIN

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

Stroke Centers

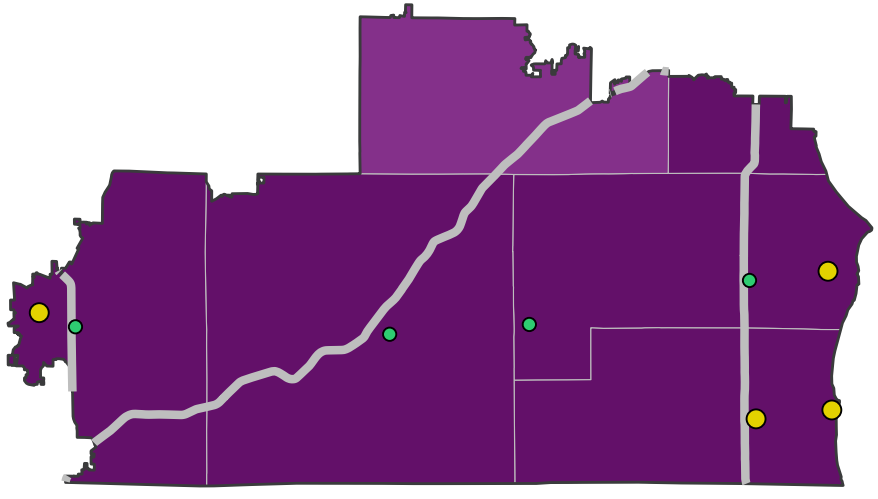
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

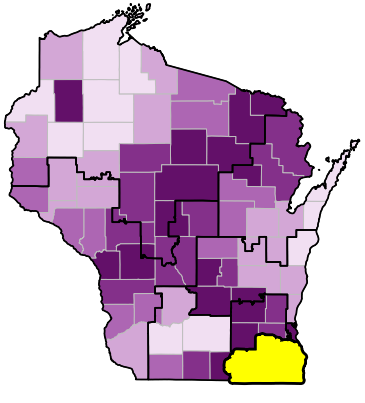
Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 1

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 1

The map for Congressional District 1 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 87 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 1 (4 Acute, 4 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254019

WISCONSIN

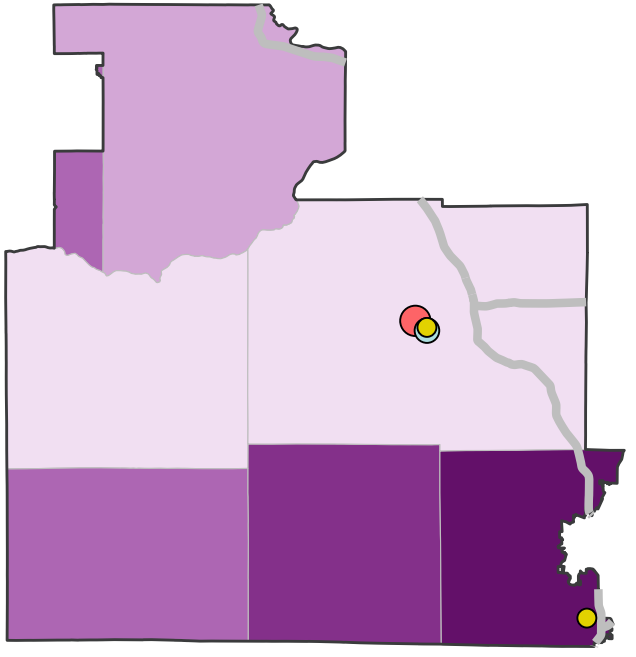
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 2

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

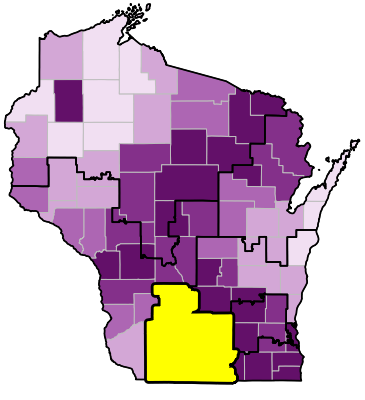
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 2

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 2

The map for Congressional District 2 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 53 − 78 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 4 stroke centers in District 2 (2 Primary, 1 Thrombectomy, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254020

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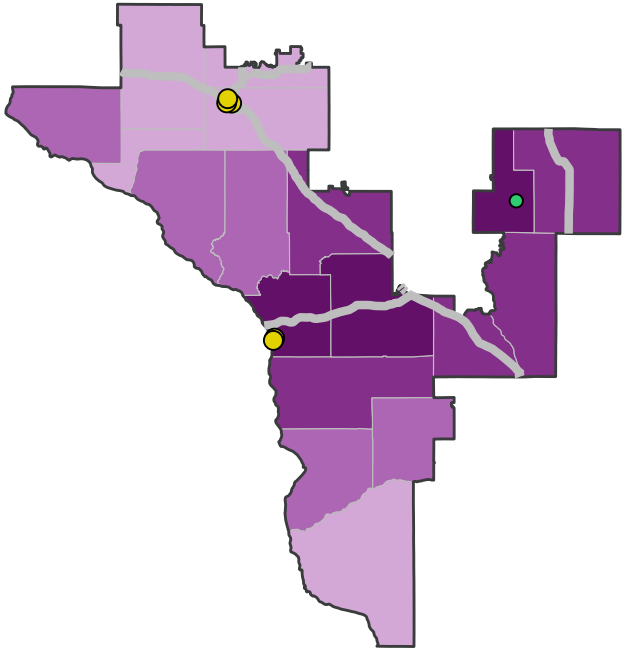
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 3

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

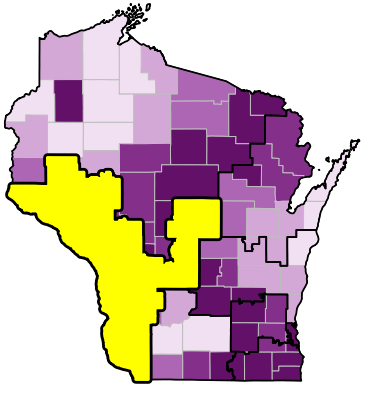
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 3

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 3

The map for Congressional District 3 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 60 − 76 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 3 (1 Acute, 5 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254021

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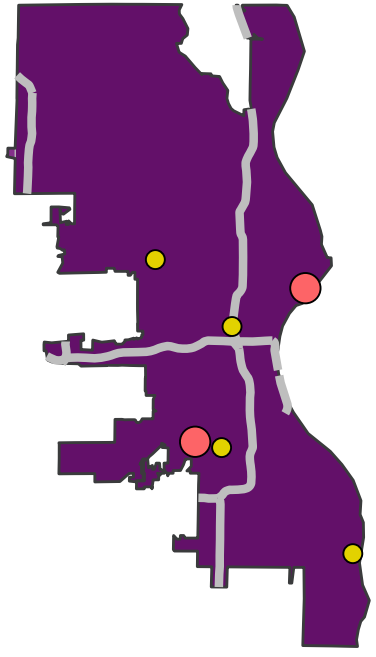
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 4

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

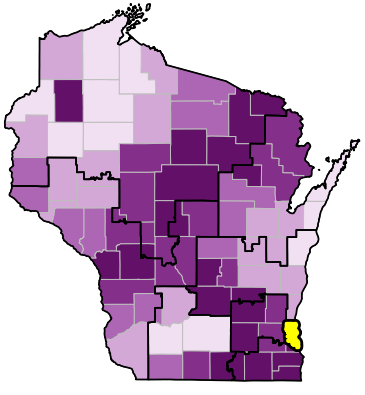
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 4

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 4

The map for Congressional District 4 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 71 − 80 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 6 stroke centers in District 4 (4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254022

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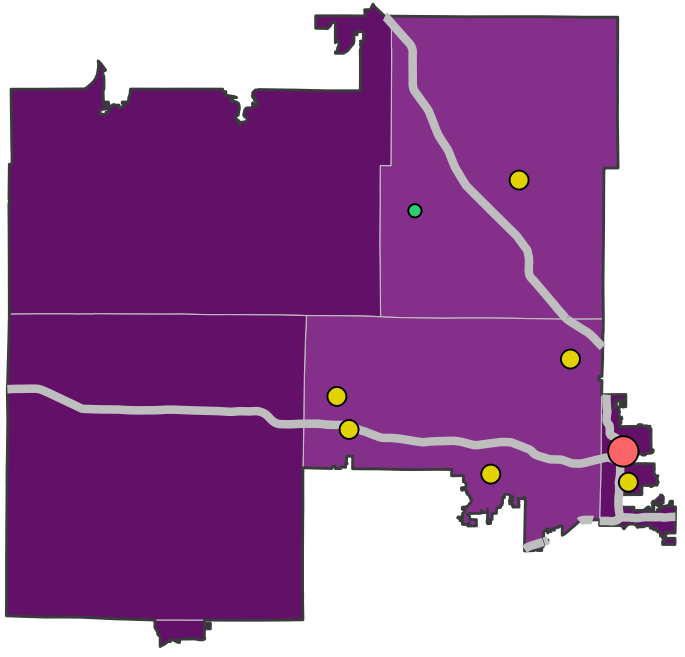
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 5

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

Stroke Centers

Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

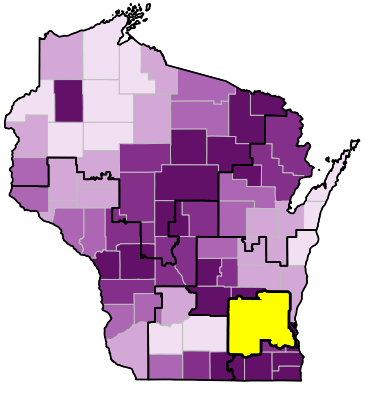
Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 5

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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WISCONSIN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 5

The map for Congressional District 5 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 70 − 80 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 8 stroke centers in District 5 (1 Acute, 6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254023

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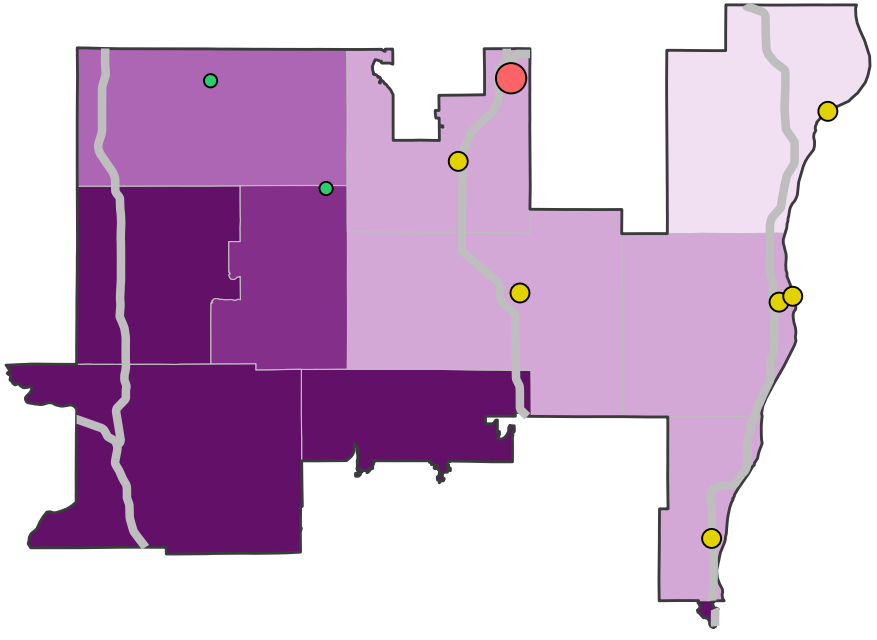
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 6

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

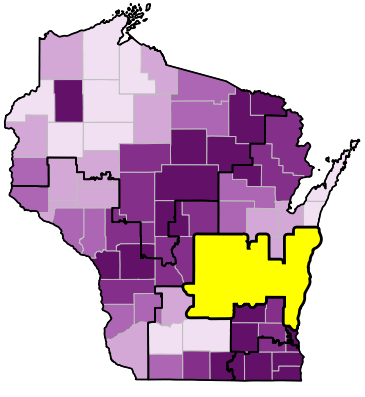
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 6

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

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What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 6

The map for Congressional District 6 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 57 − 80 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 6 (2 Acute, 6 Primary, 1 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254024

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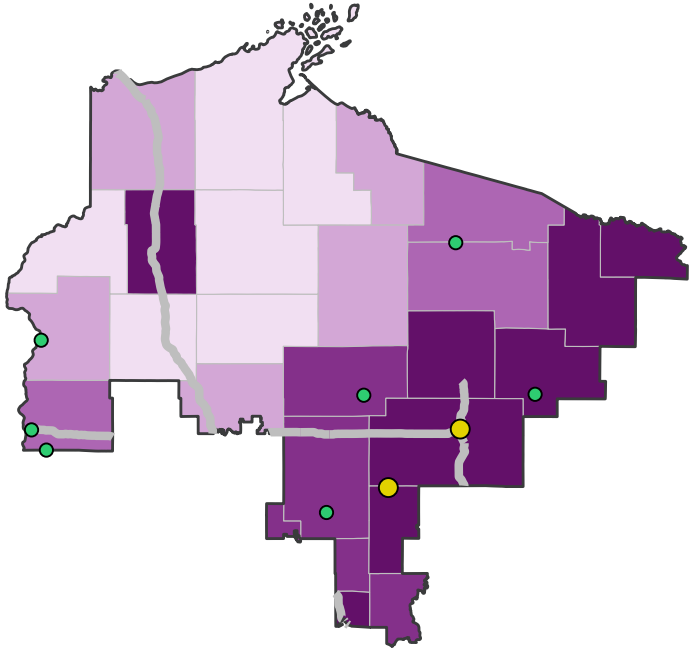
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 7

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

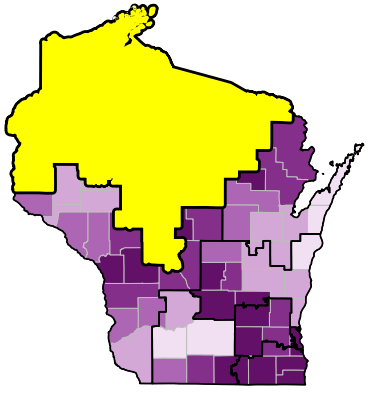
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 7

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Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

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Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

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What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 7

The map for Congressional District 7 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 48 − 76 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 9 stroke centers in District 7 (7 Acute, 2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

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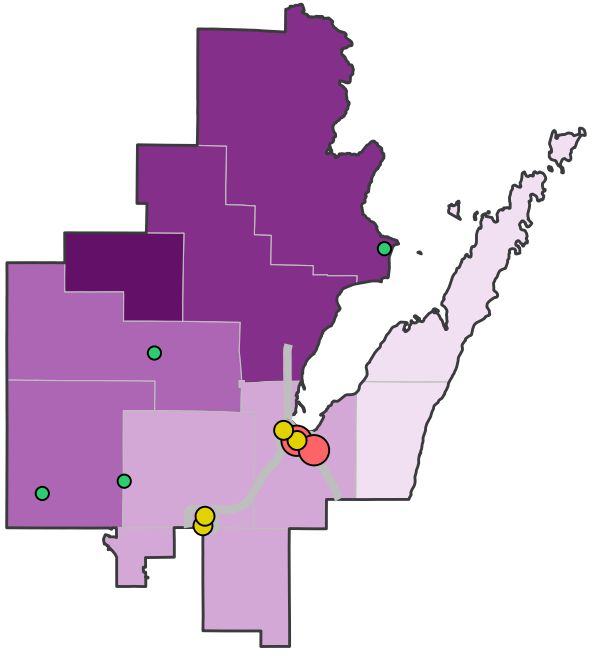
Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 8

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.



Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 48 − 59
- 59 − 65
- 65 − 70
- 70 − 73
- 73 − 87

- County*
- Highway

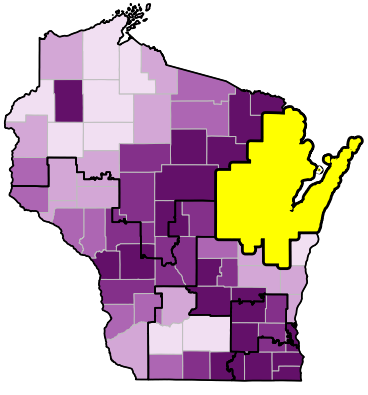
Stroke Centers

Level of Stroke Services

- **Acute Stroke Ready Hospital** (ASRH)
  Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)
- **Primary Stroke Center** (PSC)
  ASRH + Stroke Unit Coordinator, Designated Stroke Beds
- **Thrombectomy−Capable**(TC)
  PSC + Designated ICU Beds, Mechanical Thrombectomy
- **Comprehensive Stroke Center** (CSC)
  TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research

Stroke Death Rate | Wisconsin

67 per 100,000 persons



Congressional District 8

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

Quick Maps Page
FOR MORE MAPS

WISCONSIN

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

Which congressional boundaries are used to define the Congressional Districts on the map?

The Congressional Districts represent the 119th Congress of the United States. These congressional boundaries are in effect from January 2025 until the new congress begins.

Stroke Centers

The four major types of stroke centers provide increasingly advanced levels of stroke care.

What is an Acute Stroke Ready Hospital (ASRH)?

An ASRH is a hospital or emergency center with a dedicated stroke−focused program. An Acute Stroke Team is available 24/7 and at the bedside within 15 minutes. Computed tomography (CT) and labs are available 24/7. A neurologist is available at all times (in person or via telemedicine), and neurosurgical services can be provided within 3 hours via transfer. IV thrombolytics can be administered with a plan to transfer patients to a higher level stroke center.

What is a Primary Stroke Center (PSC)?

A PSC is a hospital that meets all requirements of an Acute Stroke Ready Hospital and offers more advanced services. PSCs have a stroke unit coordinator and designated beds for the acute care of stroke patients. Computed tomography angiography (CTA), an advanced imaging method is also available. Neurosurgical services can be provided within hospital or within 2 hours with transfer. IV thrombolytics and medical management of stroke is available with transfers for neurosurgical emergencies.

What is a Thrombectomy−Capable (TC) Stroke Center?

A TC Stroke Center is a hospital that meets all requirements of a Primary Stroke Center and has the ability to perform mechanical thrombectomy and meet the minimum required number of procedures annually. A neurointensive care unit or designated intensive care beds are present for complex stroke patients and on−site critical care coverage 24/7. MRI, CTA, and magnetic resonance angiography are available 24/7.

What is a Comprehensive Stroke Center (CSC)?

A CSC is a hospital that meets all requirements of a Thrombectomy−Capable Stroke Center and has the ability to treat the most complex stroke cases and meet requirements for number of advanced stroke treatment procedures performed. There is 24/7 availability for a neurointerventionist, neuroradiologist, neurologist, and neurosurgeon. Hospitals are able to treat multiple complex stroke patients at once and have on−site 24/7 neurointerventionist coverage in the stroke unit. These hospitals also participate in patient−centered research.

Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wisconsin Congressional District 8

The map for Congressional District 8 in Wisconsin shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 50 − 77 per 100,000. For Wisconsin and the United States, stroke death rates are 67 and 80 per 100,000, respectively.

There are a total of 10 stroke centers in District 8 (4 Acute, 4 Primary, 2 Comprehensive).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254026

WYOMING

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY
119th CONGRESS

DISTRICT 1

Timely access to stroke care is critical to save lives and reduce stroke−related disabilities. However, stroke centers are not evenly distributed throughout the United States.

This map highlights county−level patterns in stroke death rates and stroke centers in this congressional district and can be used to improve timely access to stroke care.

Stroke Death Rate

By county, per 100,000 persons
Ages 35 years and older, 2021 − 2023

- 37 − 56
- 56 − 59
- 59 − 62
- 62 − 64
- 64 − 66

County*
Highway

Stroke Centers

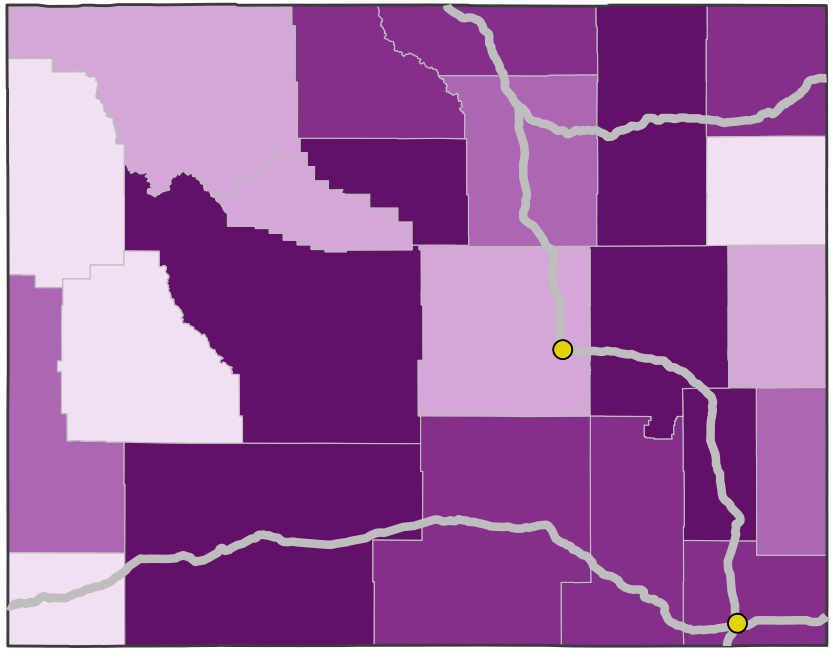
Level of Stroke Services

Acute Stroke Ready Hospital (ASRH)
Rapid Stroke Assessment, CT Scans, Stroke Drugs (IV tPA)

Primary Stroke Center (PSC)
ASRH + Stroke Unit Coordinator, Designated Stroke Beds

Thrombectomy−Capable(TC)
PSC + Designated ICU Beds, Mechanical Thrombectomy

Comprehensive Stroke Center (CSC)
TC + Neurological ICU, Treats Multiple Complex Stroke Patients, Research



Stroke Death Rate | Wyoming

59 per 100,000 persons

*Congressional district boundaries do not align with county boundaries. Therefore, some counties may be partially included in this district.

Quick Maps Page
FOR MORE MAPS

WYOMING

Frequently Asked Questions

Map of Stroke and Stroke Centers

BY CONGRESSIONAL DISTRICT & COUNTY

119th CONGRESS

Congressional Districts

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Stroke Death Rates

What is the geographic unit for the stroke death rates?

Stroke death rates are mapped for the counties within each congressional district. When county boundaries overlap congressional districts, any portion outside the boundary of the congressional district is not displayed.

How are the Stroke death rates calculated?

For each county, stroke death rates are calculated per 100,000 adults, ages 35 and older, averaged over 3 years (2021−2023) and displayed by quintile. For more details, see CDC's Atlas of Heart Disease and Stroke.

Map Description: Wyoming Congressional District 1

The map for Congressional District 1 in Wyoming shows that stroke death rates (ages 35+, 2021 − 2023) for counties (or partial counties) in the district range from 37 − 66 per 100,000. For Wyoming and the United States, stroke death rates are 59 and 80 per 100,000, respectively.

There are a total of 2 stroke centers in District 1 (2 Primary).

CDC's Division for Heart Disease and Stroke Prevention, 2026

https://doi.org/10.15620/cdc/254027