

044/100 ENDOVASCULAR THROMBECTOMY FOR CEREBRAL STROKE. THROUGH THE EYES OF THE RAD TECH!Paul Nelson*. *MUMC+, Radiology, Maastricht, Netherlands; *Invited Speaker*

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Introduction Stroke interventions require a multidisciplinary team approach and the radiology technician plays a vital role in ensuring the success of the procedure.

Aim of Study This presentation will provide an overview of neurological stroke interventions from the radiology technician's perspective, focusing on day and night situations, logistics and aftercare.

Methods During the presentation, various situations will be presented accompanied with our approach (including motivation). Adaptations based on our experience will also be included. We will also discuss the challenges of providing stroke interventions in emergency situations, such as limited resources and time constraints.

Results Attendees will gain a better understanding of the radiology technician's role in stroke interventions and the importance of their contribution to the overall success of the procedure.

Conclusion Even though the skills possessed by the interventional radiologist are essential for patient's recovery, the important role of the radiology technician must not be forgotten!

Disclosure of Interest Nothing to disclose

10. Miscellaneous**045/161 WHEN THINGS GO WRONG**

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Introduction Neurointervention is a rapidly evolving and complex field practiced by clinicians with backgrounds ranging from neurosurgery to radiology and neurology. New devices, techniques, and clinical applications create exciting opportunities for impacting patient care, but also carry the potential for new iatrogenic injuries.

Aim Every step of every neurointerventional procedure carries risks, and a thorough appreciation of potential complications is fundamental to maximizing safety for the patients.

Conclusion Devices are not always reliable.

In this presentation, we will show some cases where there were severe device failures and how we solved the complications. The role of the Angiosuite Personnel is very important in this kind of situations, especially in first place to support the Physician with his skills and knowledge.

Disclosure of Interest Nothing to disclose.

8. Neurodiagnostic**P046/186 NEURO COILS AND STENT IMPLANTS VISUALIZED THROUGH PHOTON-COUNTING COMPUTED TOMOGRAPHY**

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Introduction The development of the photon counting technology has the potential to expand the imaging possibilities of computed tomography. The new detectors calculate the energy of every single photon and provide CT Data with high spatial resolution without electric noise at lower radiation dose. This CT Imaging evolution has several advantages for neuroimaging. Here we focus on intracranial implants such as stents and coils.

Aim To visualize endovascular intracranial and cervical implants with Photon Counting Computed Tomography

Methods Ultra – High resolution CT Angiography and native head CT as well as spectral reconstruction after placement of neuro-endovascular implants.

Conclusion The results of the imaging of neuro-endovascular implants are precise and reliable. The UHR CT – Angiography and spectral reconstructions might be beneficial to monitor treatment success.

Disclosure of Interest Nothing to disclose

047/191 WORKFLOW EVOLUTION IN ACUTE STROKE ATTENTION AND NURSE CARE AT THE NEUROINTERVENTIONAL UNIT

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Introduction In the treatment of acute stroke, there are key points to optimize time. In 2022, in our centre some elements were modified to create a new circuit, in order to reduce the time from the detection of the stroke, to the moment of the start of treatment.

Aim of Study There will be better results if we make an early diagnosis and treatment.

Methods Once the stroke is confirmed, the next step is the election of the optimal treatment. Endovascular treatment is one of the possibilities in which the nursing team plays an important role.

In our centre, at the angiosuite, nursing is organized into two roles: a surgical nurse and an assistant nurse. The surgical nurse is who assists in the surgical field during sterile techniques. The assistant nurse has to take care of the patient, to