# StrokeCare Al

# Golden Hour Stroke Lifesaver

Empowering Emergency Stroke Response with AI Call Center

Indonesia Healthcare Al Hackathon 2025



Ariman – System Engineer, Simulation

AF. Nasution – Information Technology

TF. Pradatama – Research

RN. Afifuddin – System Information

Ns. Aghniya Cascara Ahmad - Medic





# **Problem Statement: Indonesia's Stroke Crisis**

Stroke is the #1 leading cause of death in Indonesia (19.42% of all deaths)

2.3 million stroke cases annually

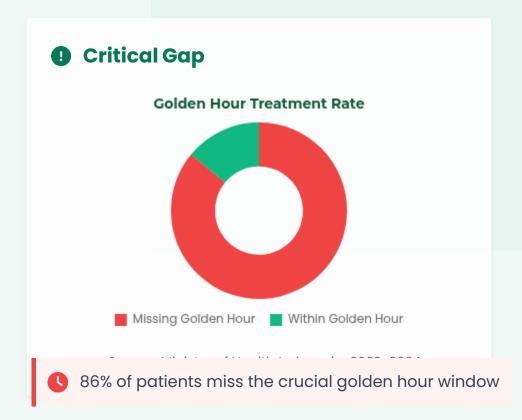
Prevalence: 8.3 per 1,000 population (2023)

11.2% of total disabilities, 18.5% of deaths

Massive cost: BPJS IDR 5.2T (Top 3 highest)

Golden hour treatment is only achieved in 14-18% of cases

Early detection remains low (11.3% of 90% target)



# **Our Solution: StrokeCare AI Call Center**

Real-time AI Voice Agent guides callers through FAST protocol

24/7 voice access, no smartphone required

Automatic ambulance dispatch integrated with stroke-ready hospitals

Technology stack:

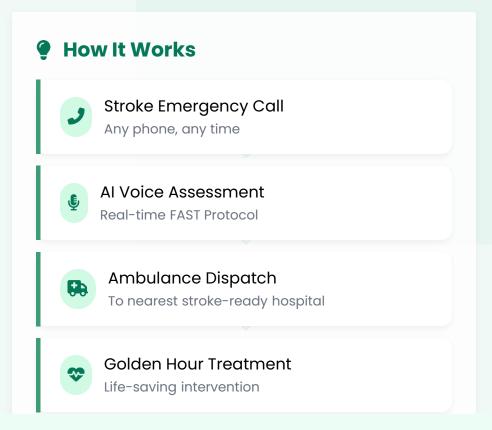
Twilio Voice Gateway

Deepgram Voice Agent

STT+AI+TTS

FAST Protocol AI

Optimized for the 4.5-hour critical golden window - 'Time is Brain'



Unique Value: First Al-powered stroke voice hotline in Indonesia with universal accessibility and real-time response

# **Market Opportunity & Target**

### 

2.3 million annual stroke cases in Indonesia

67% rise in young stroke cases in the last decade

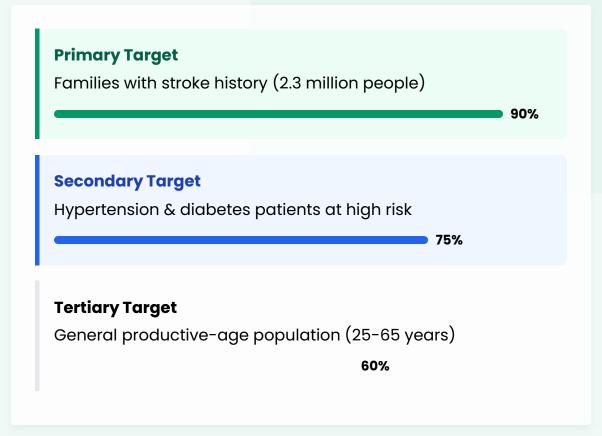
Digital health market: \$2.64B by 2025

Stroke is the #1 cause of death in Indonesia

### Growing Digital Health Market (2020-2025)



# **Target Segments**



StrokeCare AI addresses all three segments with our voice-first approach, making critical care accessible regardless of technology literacy

# **Product Demo: StrokeCare Al in Action**

# Live Simulation of Stroke Emergency Call

#### Caller:

"My father suddenly has slurred speech and his face looks uneven. What should I do?"

#### StrokeCare Al:

"I'll help assess your father using the FAST protocol. This could be a stroke - time is critical!

Let me guide you through the assessment..."

#### **FAST Protocol Assessment**



#### Face

"Ask him to smile - is his smile uneven?"



#### Arms

"Ask him to raise both arms - does one drift downward?"



#### Speech

"Ask him to repeat a simple phrase - is speech slurred?"



Time

### Stroke Confirmation



#### **Ambulance Dispatched**

ETA: 7 minutes

### **Hospital Notification:**

Nearest stroke-ready hospital has been notified of incoming stroke patient

### **While Waiting Guidelines:**

Position patient on side

Loosen tight clothing

Do not give food or drinks

Al remains connected until ambulance arrives



#### **Golden Hour Window**

Every minute saves 1.9 million brain cells

# **Business Model**



### Government Partnerships (60% Revenue)

Kemenkes National License: IDR 10-20M per region

119 Integration: Stroke-specific routing protocol

Stroke-Ready Hospital Network: IDR 2-5M per hospital



# BPJS Integration (30% Revenue)

Emergency call coverage: IDR 50K per stroke call

Golden hour bonus: Extra reimbursement for <4.5 hour treatment

Prevention program: Early detection incentives



# **Technology Licensing (10% Revenue)**

FAST Protocol Al: License to other countries

Revenue Distribution **Revenue Distribution** Government Partnerships BPJS Integration Technology Licensing **Economic Advantages** Cost per call: IDR 2,000 (vs IDR 30,000 traditional) Lives saved: 2,000+ annually Healthcare cost reduction: IDR 1B annually

# **Competitive Landscape**

Features	StrokeCare AI	FAST Rescue App	Traditional 119
Interface	Voice AI 24/7	Mobile App	Human Operators
Accessibility	Any phone	Smartphone only	Limited hours
Stroke Focus	100% specialized	Stroke-specific	General emergency
FAST Protocol	Al-guided real-time	Self-assessment	Not integrated
Response Time	0 seconds	User dependent	2-5 minutes
Language	Natural Indonesian	Text-based	Formal procedures

# StrokeCare Al Competitive Advantages



First Al-powered stroke voice hotline in Indonesia Breaking barriers to emergency access



Real-time FAST protocol guidance

Vs self-assessment with uncertain accuracy

# Meet the StrokeCareAl Team



#### **Ariman**

System Engineer, Simulation

Expert in healthcare system simulation and technical architecture design for medical emergency response systems.



### **AF. Nasution**

Information Technology

Specialized in AI systems development with extensive experience in voice recognition technologies and emergency systems.



### TF. Pradatama

Research

Data scientist focused on stroke pattern recognition and golden hour optimization research in Indonesian healthcare settings.



### RN. Afifuddin

System Information

Expert in healthcare information systems integration with focus on emergency dispatch and hospital networks.



# Ns. Aghniya Cascara Ahmad

Medic

Experienced medical professional specializing in emergency care and stroke protocol implementation. Provides critical medical expertise for the FAST Protocol AI development.

# Financials & Impact

Year 1: IDR 50M revenue, 25,000 emergency calls

Year 3: IDR 800M revenue, 400,000 calls, national scale

2,000+ lives saved per year with golden hour improvement

5,000+ disabilities prevented, IDR 1B in health cost reduction

40% increase in golden hour treatment rate (from 14% → 40%)



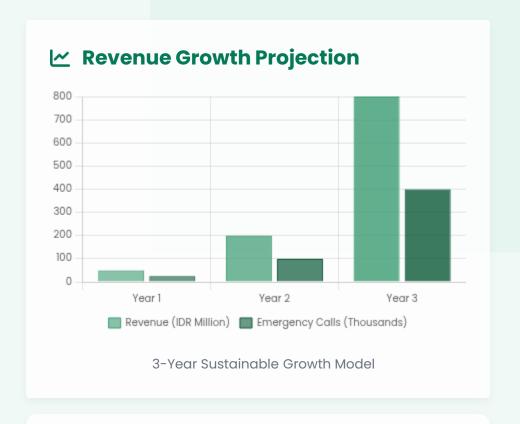
### **Life-Saving Impact**

Every 100 calls to StrokeCare AI potentially saves 8 lives through faster treatment



### **Quality of Life Improvement**

20% reduction in post-stroke disability through golden hour optimization



**14%** → **40%** 

IDR 1B

StrokeCare Al: Financially sustainable with measurable health outcomes

# **Ask & Next Steps**

# **Partnership Requests**



Ministry of Health

National Stroke Program Integration



Indonesian Stroke Society

Medical Protocol Validation



119 Emergency Services

Stroke-specific Routing



Stroke-Ready Hospitals

Direct Admission Pathway

# **Funding Requirements**

Development  FAST AI Protocol & Voice Integration	IDR 40M
Year 1 Operations Infrastructure & Marketing	IDR 200M
Total Investment For 25,000 stroke emergency calls	IDR 240M

# **Implementation Roadmap**

Week 1-2

FAST Protocol AI development & neurologist validation

2 Week 3-4

Pilot launch Jakarta (3 stroke-ready hospitals)

Month 2

Scale to Java island (20 hospitals)

Month 3-6

National rollout (100+ stroke-ready hospitals)

### **Expected Outcomes**

**2,000+**lives saved in Year 1 **40%**golden hour improvement

IDR 1Bhealthcare savings

National stroke response system

# References

- Kementerian Kesehatan Republik Indonesia. (2023). Profil Kesehatan Indonesia 2023. https://kemkes.go.id/app\_asset/file\_content\_download/172231123666a86244b83fd8.51637104.pdf
- Kementerian Kesehatan Republik Indonesia. (2024). Survei Kesehatan Indonesia (SKI) 2023 hasil & angka. https://www.badankebijakan.kemkes.go.id/hasil-ski-2023/
- American Heart Association. (2019). Suggested Time Interval Goals for Stroke Treatment (Door-to-Needle etc.) [PDF]. https://www.heart.org/-/media/files/professional/quality-improvement/target-stroke/target-stroke-phase-iii/9-17-update/ds14860-time-interval-one-pager\_v2.pdf
- Khandelwal, A., Sarma, K., Hussain, M., Dikshit, P., & Baidya, D. (2025). Acute ischemic stroke and the golden hour: Critical updates. Journal of Neurosciences in Rural Practice. https://ruralneuropractice.com/acute-ischemic-stroke-and-the-golden-hour-critical-updates/
- "Door to needle time 25 minutes thrombolysis therapy in acute ischemic stroke." Journal of Neurosurgery. https://www.jns-journal.com/article/S0022-510X%2819%2930999-2/fulltext