

Welcome to the Wimmera Health Care Group. This Pathway provides an outline of the plan of care you may receive during your hospitalisation for Stroke (proven or suspected).

Please take time to read this leaflet.

Please note this is only a guide and that care and treatment varies enormously, depending on the severity and diagnosis. Your doctor and nurse will talk to you about this. Please use this pathway to help understand your condition and care.

WHAT IS A STROKE?

A stroke is a sudden interruption of the blood supply to an area of the brain either by a clot or a burst blood vessel (a bleed). This results in damage to the brain. A stroke affecting one side of the brain will affect the opposite side of the body.

A stroke may cause one, some or more of these problems:

- loss of consciousness – this may only be temporary
- weakness on one side of the body
- disturbance of sensation to one side of the body
- difficulty with speech or language
- difficulty with swallowing
- loss of bladder control
- memory disturbance
- partial loss of vision
- loss of emotional control.



The nursing staff will:

- provide personal care including feeding, bathing and general hygiene
- observe you closely and monitor changes
- co-ordinate your care and provide information to other health professionals about your progress
- liaise with families and carers
- assist with discharge planning
- teach you and your family about stroke risk factors and prevention.



Discharge Planning / Education

Planning for discharge occurs throughout your stay in hospital to ensure continuation of care you may require when you go home. The Admission and Discharge Coordinator and members of the Health Care Team including you and your family/carer, will be involved in this process.

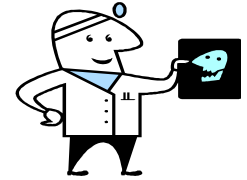
Staff will:

- arrange community support services such as District Nursing, Meals-on-Wheels and Home Help, if required;
- make appointments to see your doctor and/or other health care professionals;
- co-ordinate transfer to other health care facilities, if required.



Disclaimer: This patient pathway is intended as a guide only. As each patient is an individual and responds differently, the care plan may alter. If you have questions, please discuss with your Doctor or Nurse.

DAY OF ADMISSION



Tests/Observations/Treatment

You will have:

- general medical assessments done by nurses and doctors
- ECG (heart tracing)
- blood tests
- finger prick test for sugar
- CT Scan of the brain (x-ray) and possibly a chest x-ray
- urine test.

You will be observed closely for 48 hours for any change in condition.

The nurse will measure and record:

- blood pressure, pulse, temperature, breathing rate and oxygen levels, conscious state, pupil reaction and limb movement regularly.

You may have:

- 1 small plastic tube in the vein in your arm to give you fluids and medication
- oxygen through a facemask or nasal prongs
- Aspirin if your stroke is caused by a blockage/clot in a blood vessel
- other medications as ordered by your doctor.

Please tell the staff of any pain or discomfort you have and pain relief will be provided.

Nutrition

You will have a swallow assessment completed by the doctor, nurse or Speech Therapist to see if it is safe for you to take food or fluids.



You may:

- have a naso-gastric tube passed through your nose into your stomach to enable staff to give you medication and fluids, if it is not safe for you to swallow
- not be able to eat or drink **or**
- you may need to have your fluids thickened and food vitamised.

Elimination

You may have a Urinary catheter (in your bladder) to help drain urine.



Activity / Personal Care

A nursing assessment of your risks for falling, pressure areas and discharge will be completed to ensure measures are taken to reduce these risks, i.e.:

- low beds
- Spenco (soft) or air mattress
- frequent turns
- referral to Admission/Discharge Co-ordinator.

You may:

- need to remain in bed for the first 24 hours
- require assistance with your hygiene
- have pressure stockings on your legs to prevent clots forming.
- need frequent position changes by the nurse, a special mattress or bed to prevent pressure on areas of your body.

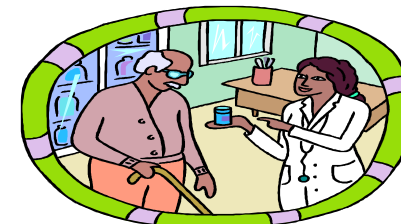
Bladder and Bowels

You will be referred to the Continence Nurse and if appropriate, a program will be commenced to help you regain bladder and bowel control. This will be discussed with you and your family / carer.

Activity / Personal Care

Your **physiotherapist** will:

- visit you daily to assess how you are progressing
- teach you to use a variety of equipment and techniques that can help you to move about safely inside and outside your home
- provide education about equipment and techniques to family and carers.



You may attend the Community Rehabilitation Clinic for physiotherapy.

Your **occupational therapist**:

- may visit you several times during your stay in hospital
- may visit your home, recommend modifications and arrange the loan and / or hire of equipment
- will focus on the functional skills required to return home and may devise a specific retraining and activities program to improve skills and confidence.

DAY 3 ONWARDS

Tests/Observation/Treatment

Your **doctor** may request:

- further blood tests
- repeat CT of the brain
- Warfarin- a tablet to prevent the formation of blood clots. This may be started 48 hours after your stroke (regular blood tests will be needed to monitor your response to this drug)
- the intravenous drip stopped and needle removed



Communication/Nutrition/Elimination

Your **Speech Pathologist** will:

- continue to monitor your swallowing
- ensure the right type of food and drink consistencies are available
- continue with therapy to assist you with any communication difficulties
- provide family members with advice on techniques to help you communicate, using gestures and / or communication book



The nasogastric tube will be removed as soon as you are able to eat and drink enough.

Discharge Planning / Education

You will have your admission discussed with you and your family but the expected length of stay will not be known until your condition has stabilised. A brief explanation of stroke will be provided and your questions answered.



DAY 1 TO 3

Tests / Observation / Treatment

Your Doctor will visit you each day. You may need:

- blood tests including fasting cholesterol and glucose
- Echocardiogram (ultrasound X-ray of the heart)
- Doppler examination of the arteries in your neck

(These tests are done to find a possible cause of your stroke)

You will continue to be observed closely for 48 hours or longer, if necessary. Every 4-6 hours the nurse will measure and record:

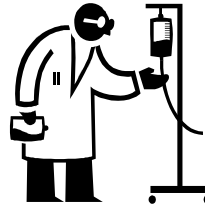
- blood pressure, pulse, temperature, breathing rate, oxygen levels, conscious state, pupil reaction and limb movement.

Communication / Nutrition / Elimination

You will be seen by:

- The Speech Pathologist who will:
 - test your ability to swallow and advise on food and fluid consistency
 - test your ability to speak clearly and use the correct words, providing assistance as necessary.
 - test your ability to understand speech and written language.
- The Dietitian who will:
 - manage alternative feeding (via a tube from your nose to your stomach) if your swallow is affected
 - work with the Speech Pathologist to provide thickened fluid or soft food
 - provide information on healthy eating and reducing risk of future strokes

If you have a **catheter**, this will be removed as soon as it is no longer required, usually within 24 – 48 hours.



Activity / Personal Care

You will be seen by:

- **The physiotherapist** who will assess the effect that the stroke has on:
 - range of motion and strength in limbs
 - ability to move in, on and off the bed
 - ability to get up and down from a chair
 - ability to maintain balance and to walk
 - your risk of acquiring a chest infection.
- **The occupational therapist** who will assess your independence with:
 - upper arm movement
 - personal care (showering, dressing, toileting and grooming)
 - domestic and work duties social and leisure activities.



Discharge Planning / Education

The **social worker** will:

- give you this pathway and a package with written information about stroke
- provide support through:
 - counselling for you or your family
 - referral to other services eg. Centrelink and agencies with financial and/or legal expertise
 - planning for your return to home or alternative accommodation
 - the stroke support group.