

Kaweah Health Stroke Program

Physician and Allied Health
Professional Stroke Orientation
May 2022



[kaweahhealth.org](https://www.kaweahhealth.org)



Physician and Allied Health Professional Stroke Orientation

Kaweah Health is a Primary Stroke Certified center through the
Joint Commission since 2018



**The Joint
Commission®**



**American Heart
Association®
American Stroke
Association®**

C E R T I F I C A T I O N

Meets standards for

Primary Stroke Center

Physician and Allied Health Professional Stroke Orientation

This means that all stroke patients are evaluated and managed according to the current evidence and recommendations as outlined by the American Heart Association/American Stroke Association guidelines

Physician and Allied Health Professional Stroke Orientation

Most stroke patients are admitted at KH, but those requiring advanced endovascular or neurosurgical intervention are transferred to a tertiary care center

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On presentation to the Emergency Department....

Suspected stroke patients have a *Stroke Alert* called, which prioritizes them for physician evaluation, CT imaging, and neurology consultation

Admission criteria and destination is outlined on the next slide

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TIA/STROKE GUIDELINES

	ICU	ICCU	OTHER UNIT
NURSING WORKLOAD	<ul style="list-style-type: none"> • Ratio 1:1, 1:2 • Continuous observation and interventions more frequently than every 2 hours 	<ul style="list-style-type: none"> • Ratio at most 1:3 • Frequent observation and intervention no more frequently than every 2 hours for limited time. 	<ul style="list-style-type: none"> • Tele-Med/Surg Ratio 1:4 • Routine observation and intervention no more frequently than every 4 hours.
STROKE/TIA	<ul style="list-style-type: none"> • Cerebellar hemorrhage • CVA with Thrombolytics –ICU level of care suggested for 24 hours after Thrombolytic administration • CVA with Airway compromise • CVA with Hemodynamic Instability • CVA with Mod. Hemodynamic Instability requiring vasoactive medication titration – Preferred ICU • Hemorrhagic CVA with Hemodynamic Instability <p>Policy References: 1) PC.19 Medication Administration 2) PC.180 Patient Placement Guidelines</p>	<ul style="list-style-type: none"> • Hemorrhagic CVA - Hemodynamically stable and patent airway • Cerebellar Stroke - critically stable. 	<p>OBSERVATION UNIT (PREFERRED 2 SOUTH):</p> <ul style="list-style-type: none"> • TIA patients <p>MED/SURG/TELE UNIT (PREFERRED 4 SOUTH):</p> <ul style="list-style-type: none"> • CVA patients

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To assist in achieving the best evidence-based care for stroke patients as well as being in compliance with Joint Commission standardized practices, admission PowerPlans have been developed.











These should be used for patients admitted for TIA, ischemic stroke, and hemorrhagic stroke

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The Stroke
PowerPlans can
be found by
typing in “stroke”
in Cerner order
entry



stroke|  Advanced Options ▾ Type:




- Stroke Alert
- Stroke Education
- Stroke Quality Measures
- Stroke Risk Assessment
-  ED Stroke Alert GREATER than 4 hours or Wake Up
-  ED Stroke Alert LESS than 4 hours
-  ED Stroke/TIA - NON ALERT
-  NEURO Stroke Admission ICU (POST-Alteplase)
-  NEURO Stroke Admission ICU/ICCU (NON-Alteplase)
-  NEURO Stroke Admission Med-Surg (NON-Alteplase)
-  NEURO Stroke Alert Inpatient
-  NEURO Stroke Intracerebral Hemorrhage Admission ICU/ICCU
-  Neuro/Stroke MED Tube Feeding: Small Bowel (ADULT Patients)
- NIH Stroke Scale
-  ED Stroke: Intracerebral Hemorrhage




"Enter" to Search

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The TIA
Observation
PowerPlan can be
found by typing
“TIA” in Cerner
order entry



TIA|  Advanced Options  Type:  Inpatient

-  Clinical Pathway TIA
-  ED Stroke/TIA - NON ALERT
-  NEURO Transient Ischemic Attack (TIA) Observation

A+D topical ointment
A+D topical ointment (1 app, Topical, Ointment, every 4 hours., PRN other (see co
Absorbine Athletes Foot 1% topical cream
Absorbine Athletes Foot 1% topical cream (1 app, Topical, Cream, BID)
Absorbine Athletes Foot 1% topical cream (1 app, Topical, Cream, Once)
Acticin 5% topical cream
Acticin 5% topical cream (1 app, Topical, Cream, Once)
Acticin 5% topical cream

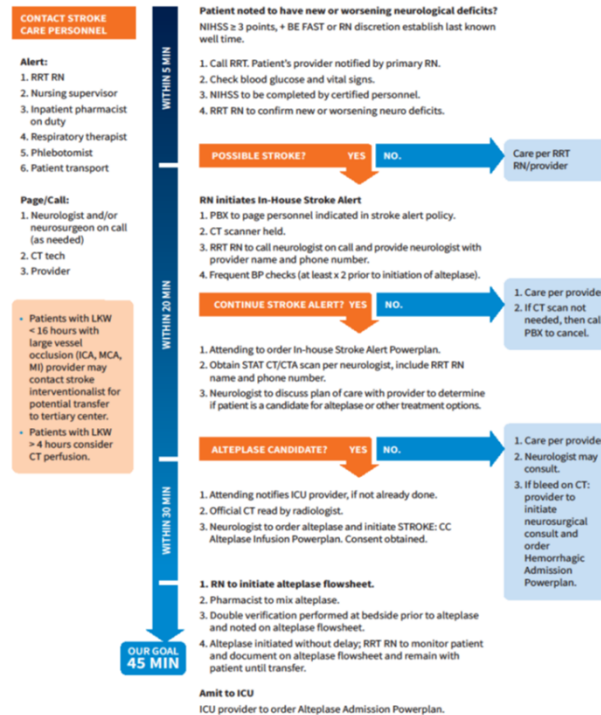
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Inpatient Stroke Alert process

- For patients who have acute onset of new neurologic symptoms, or an increase in NIHSS score of 3 or more, the rapid response team (RRT) is activated to evaluate the patient
- The rapid response nurse will perform a full NIHSS score and calls the neurologist who initiates the inpatient stroke alert order set. The patient's nurse will call the primary attending physician. The on-call neurologist will review the CT findings and discuss treatment options with the hospitalist and patient.
- Patients who receive Alteplase as a result of an inpatient stroke alert will be transferred to the ICU

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Inpatient Stroke FLOWCHART



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Know the signs of stroke



BALANCE
Sudden loss of
balance

EYES
Sudden change
in vision

FACE
Sudden facial
droop

ARM
Sudden arm or
leg weakness

SPEECH
Sudden speech
difficulty

TIME
to call
911

FAST emergency treatment may reduce disability and save your life

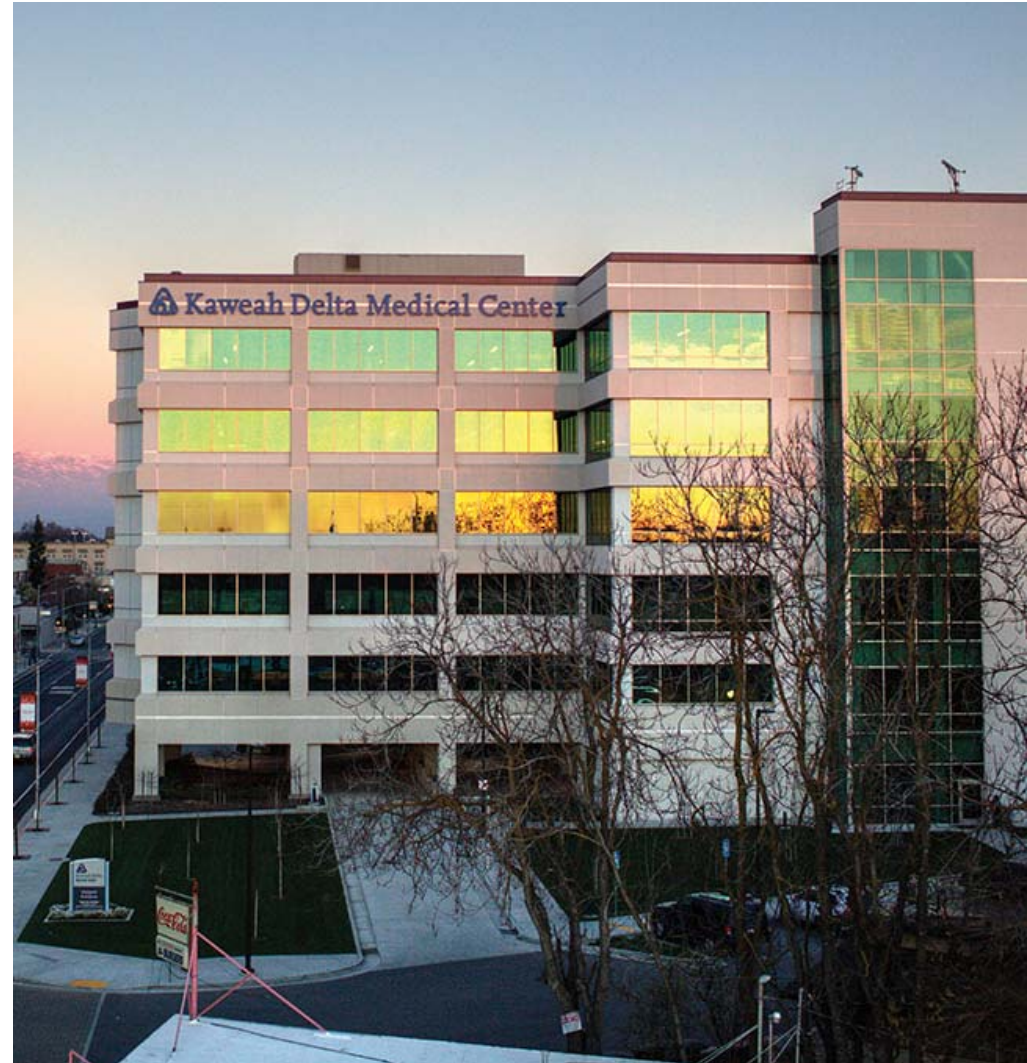
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Live with passion.

Health is our passion. Excellence is our focus. Compassion is our promise.

