

STROKE:

WHAT YOU NEED TO KNOW



PATIENT AND FAMILY EDUCATION
AND HEALTH JOURNAL

UPSTATE
COMPREHENSIVE STROKE CENTER

INTRODUCTION

Having a stroke can be an overwhelming experience with information coming from many different sources. This booklet is meant to be an easy-to-read, helpful tool for you and your family both in the hospital and after you leave. Please check with your nurse or care team if you have any questions. Important information and resources can be found on the back cover. Keep this book handy because you may need to reference it later as you have questions.

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STROKE SYMPTOMS: KNOW WHAT TO WATCH FOR.... **FAST-ED**



**Facial
Droop**



**Arm or Leg
Weakness**



**Speech
Trouble**



**Time/Terrible
Headache**



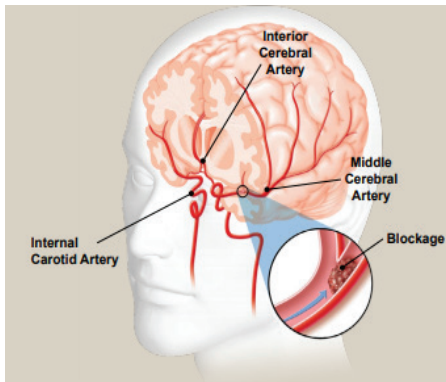
**Eye Deviation
or Vision Loss**



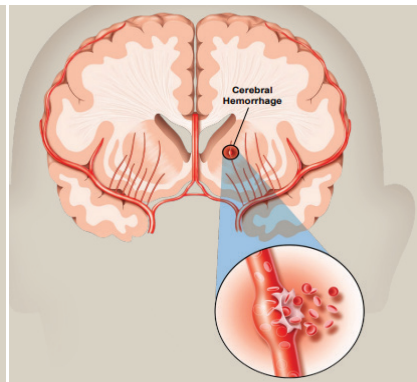
**Dizziness
or Denial**

The sudden onset of any of these symptoms or the worst headache of your life could be a stroke. Call 911. Do not drive yourself to the hospital.

TYPES OF STROKE



Ischemic (blockage)



Hemorrhagic (bleeding)

I WAS TREATED FOR:



TRANSIENT ISCHEMIC ATTACK A temporary blockage or interruption of blood flow in an artery of the brain that produces symptoms that do not last. These have been called “mini” or “warning” strokes. Even though they are temporary, symptoms should not be ignored.



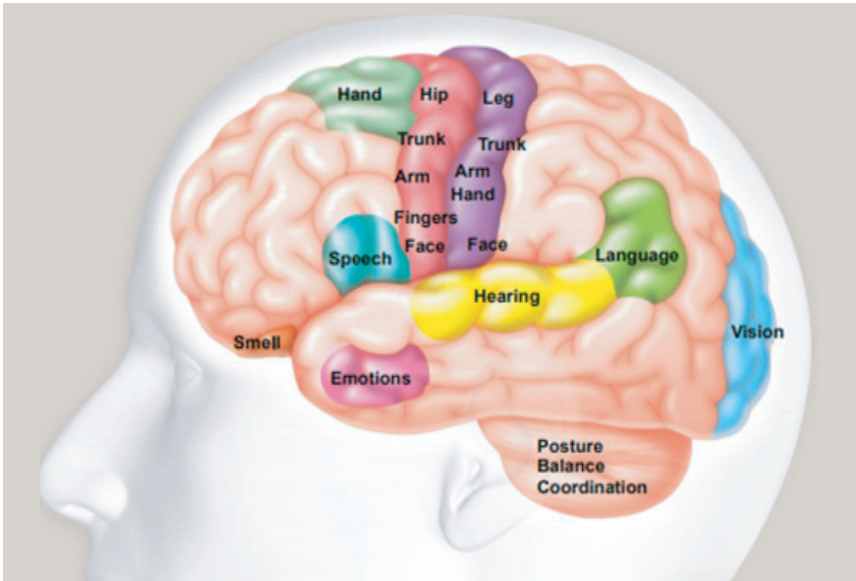
ACUTE ISCHEMIC STROKE An artery in or leading to the brain is blocked either by a clot or plaques; suddenly causing a decrease or no blood flow to that area. Without blood flow, which carries oxygen, brain cells in that area begin to die.



HEMORRHAGIC STROKE An artery in the brain has burst and spills blood into or around the brain. Two types are called Intracerebral Hemorrhage or Subarachnoid Hemorrhage, depending on the location in the brain. These strokes are typically caused by high blood pressure or a weakening or bulging in the artery wall (aneurysm) which can burst suddenly.

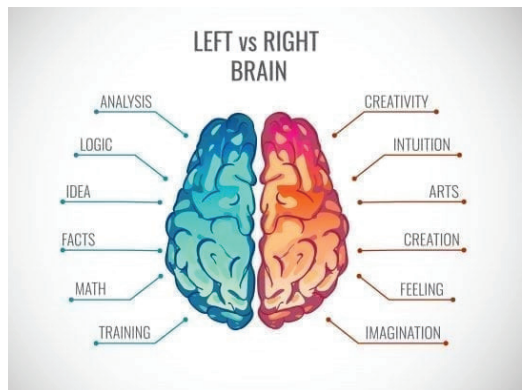
HOW A STROKE AFFECTS YOU

Where your stroke happens in your brain can determine the effects you may experience after your stroke



The **left side** of your brain controls the right side of your body. The left brain is responsible for things like moving the right arm and leg, number skills, spoken language, reasoning and scientific functions.

The **right side** of your brain controls the left side of your body. The right brain allows you to move the left arm and leg, do creative things, appreciate music or art, or find where you need to go.



STROKE TESTING



CT ANGIOGRAM (CTA) An imaging test of your arteries in the brain to look for blockages and areas of decreased blood flow.



CT PERFUSION An imaging test of your arteries in the brain to look at blood flow.



MRI –BRAIN An imaging test of all areas of the brain including the deep structures of the brain and base of spinal cord to detect strokes of different types or confirm if you have had a stroke.



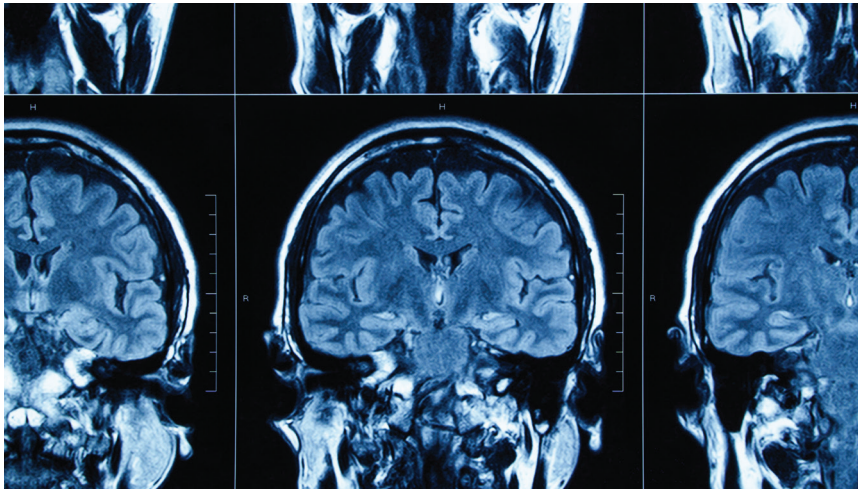
ECHOCARDIOGRAM An ultrasound test to look at the heart's structure and how effectively the heart is pumping blood. The test is good if doctor's suspect your heart may be a possible cause of the stroke.



TRANSESOPHAGEAL ECHO (TEE) This is an ultrasound that provides detailed images of the heart and its structures to detect blood clots, evaluate heart valves and identify abnormal heart beats.



SWALLOW EVALUATION A test done at the bedside by a nurse or speech language pathologist. This test will determine if you can safely swallow.



STROKE TREATMENTS AND PROCEDURES

ISCHEMIC STROKE TREATMENT

THROMBOLYTIC (CLOT BUSTER) This drug given through an IV is time-sensitive and can potentially break up the clot in your brain.

THROMBECTOMY (CLOT REMOVAL) Removal of a clot from your artery in the brain using a device introduced through an artery in the wrist or groin.

IMPLANTABLE LOOP RECORDER (ILR) A small device inserted under the skin of the chest to monitor for irregular heart rhythms, like atrial-fibrillation (or A-fib).

HEMORRHAGIC STROKE TREATMENT

COILING Specialized coils are introduced into an aneurysm, or an outpouching, weakened areas in the wall of an artery. These coils are introduced through an artery in the wrist or groin and are used to stop blood from flowing into the weak area of the vessel.

CLIPPING A small clip is used to clamp the neck of the aneurysm, stopping blood from flowing into the weakened area of the vessel wall.

CRANIECTOMY Part of the skull is removed to access the vessels that are bleeding or to relieve pressure on the brain caused by swelling or bleeding in the brain.

EXTERNAL VENTRICULAR DRAIN (EVD) A catheter is placed into the ventricles of the brain to drain blood and fluid out that are causing increase pressure.



MY STROKE RISK FACTORS

(CHECK ALL THAT APPLY)

- High Blood Pressure (uncontrolled)
- High Cholesterol
- Obesity
- Smoking
- Atrial Fibrillation
- Diabetes
- Alcohol/Drug Use
- No Regular Exercise
- Sleep Apnea
- Previous Stroke or TIA
- Previous Heart Attack
- Family History of Stroke or Clotting Disorder
- Birth Control or Hormone Replacement
- Recent Pregnancy
- Migraines
- Cancer
- Other: _____



It is important to quit smoking if you are a smoker and not to start if you are not currently a smoker. If you or your loved one needs information or help to quit smoking, please contact:

1-866-NY-QUITS (1-866-697-8487)

or visit: **NYSmokeFree.com**

LOWERING MY STROKE RISK

Blood Pressure (BP) Checks

Keeping your BP in the desired range as directed by your provider is the most important thing you can do. If you are prescribed any BP medications, take as directed. Checking your blood pressure at home using a home monitor is also a good idea.

Use the boxes on page 11 to record and report your readings to your provider.



A heart-healthy diet is a brain-healthy diet!

Try eating more vegetables, fruit and healthy protein and cut back on processed meats, salt and high-fat foods. Read up on the DASH diet for long-term results.



Activity

Regular exercise of any kind will help your heart and brain. Even if you have not exercised in years, today is the day you can begin to make healthy changes. Taking a brisk walk for five or 10 minutes a few times a day will add up. Consult with your provider for advice and planning.



Sleep Apnea

If you often feel tired throughout the day or are told you snore during sleep, ask your provider for sleep apnea testing. Lack of good sleep can affect the brain and contribute to stroke.



Healthy Life Habits

Smoking greatly increases your risk of heart disease and stroke. Limit alcohol intake and stress levels in your life to help reduce risk.



My goals: _____

MEDICATIONS



You may have started new medications while in the hospital. It is important to take these medications as directed by your provider. Please call your provider or pharmacist if you have any questions about your medications. Do not stop taking these without consulting your provider.



Anti-platelet Medications:

These medications help reduce the clumping of the platelets in our blood, which can add to a blockage of an artery and then a stroke.

Aspirin and/or Plavix (Clopidigrel) are the most common.

My anti-platelet medications: _____



Blood Pressure Medications:

Many people need to take medications to control their blood pressure after a stroke. Some people take time to adjust to these medications. For these medications, it is recommended that you at first change positions slowly, stay hydrated by drinking water and take your medication at the same time every day.

My blood pressure medications: _____



Anticoagulant Medications:

Commonly referred to as “blood thinners,” these medications decrease the risk of forming blood clots and are often used for patients after an ischemic stroke. If you experience any bruising, bleeding gums or blood in urine or bowel movements, contact your provider immediately.

My anticoagulant medications: _____



Cholesterol Medications:

Whether or not you have high cholesterol, this medication may be added to help decrease plaque from sticking or building up in your arteries.

My cholesterol medications: _____



Statin Medications:

Stroke patients are given statins because these drugs lower cholesterol, reducing the risk of future strokes and improving heart health by preventing plaque buildup in the arteries. Additionally, statins reduce the chance of plaque in the arteries breaking off causing clots.

My statin medications: _____

MEDICATION ADHERENCE PROGRAM

The Medication Adherence Program makes it easier for patients to obtain and manage all their medications. Taking medications as prescribed greatly reduces the risk of having a second stroke.

Our program includes several helpful services:

- Help with prior authorization of medications.
- Looking for other sources to help make medications more affordable.
- Pharmacist review of all your current medications.
- Setting up home delivery of medications, if desired.
- Monthly phone calls from a pharmacist to answer any questions or to see if anything can be improved.

Stroke patients are automatically enrolled in this very effective program unless the patient chooses to opt out. If you have chosen not to participate and would like to enroll after discharge, or if you want to speak to the pharmacy staff for more details, call 315-464-8875 Monday–Friday from 7:30 a.m. to 5:30 p.m.



STROKE REHABILITATION

The best plan for your recovery may mean a stay at a rehabilitation facility for physical or other therapy before going home. Our Case Manager & Discharge Planning team will help you select the place most suited for your needs.

THINGS TO HELP IN RECOVERY

- Go to therapy sessions with an open mind, ready to participate.
- Understand that stroke recovery takes time.
- If I have difficulty speaking or expressing myself, I will not blame myself and I will try not to get frustrated. I will use gestures and yes/no questions. I will try to take my time and let others know I need more time for responses.
- Remove distractions or noise in order to focus.
- Let my family or caregiver know if I am experiencing depression.
- Ask for help or look for other resources (Stroke Support Group).
- Strive for a “Can Do” attitude.



STROKE THERAPY

Experiencing a stroke brings changes, but stroke therapy can help you regain the ability to perform your most important tasks and activities. The three most common types of therapy for stroke survivors are:

Physical Therapy (PT)

helps improve strength, coordination and balance after a stroke. The goal is to help you return to important daily activities. PT uses exercises, walking training, hands-on techniques and activities tailored to your specific needs to help you regain independence and improve your quality of life.



Occupational Therapy (OT) helps you or your loved one become as independent as possible in daily life. This includes tasks like eating, dressing, bathing, taking care of the home, preparing meals, shopping and managing medications. Activities such as driving, returning to work or school and leisure tasks may need specific testing or safety assessments. An occupational therapist can assess and improve balance, strength, vision, sensation, coordination and thinking skills.

Speech/Language Therapy activities can include swallowing therapy to guarantee the safest diet possible without coughing, choking or food/liquid entering your lungs. Speech therapy also works on improving your speech, language and thinking skills. This helps with reading, writing, understanding, talking, remembering and organizing your daily activities.

Recommendations will be discussed with you/your family prior to discharge.

CNY STROKE AND ANEURYSM SUPPORT GROUP

SPONSORED BY UPSTATE COMPREHENSIVE STROKE CENTER

Join fellow survivors, family members and care givers to learn more about living and loving life after stroke and brain aneurysm.

Each meeting will have an educational featured speaker and provide ongoing support to discuss recovery topics and additional resources. These meetings will also provide an opportunity for members to connect and support each other beyond monthly meeting times. Join fellow survivors, family members and care givers to learn more about living and loving life after stroke and brain aneurysm.

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**FOR MORE INFORMATION,
CALL UPSTATE CONNECT AT 315-464-8668
OR VISIT [UPSTATE.EDU/STROKESUPPORT](https://www.upstate.edu/strokesupport).**

FOLLOW-UP APPOINTMENTS

ARE A VERY IMPORTANT PART OF YOUR RECOVERY PROCESS

Refer to your discharge instructions for appointment details. The majority of stroke patients will follow up with at least one of these providers:

PRIMARY CARE PROVIDER: They will be the coordinator for the other specialty providers and help manage any new medications after your discharge.

MY PRIMARY CARE APPOINTMENT _____

NEUROLOGIST OR STROKE NURSE PRACTITIONER: They will help monitor the specific issues you may have experienced with your stroke, determine if any additional therapy is needed and coordinate with your primary provider. You may only require 1 or 2 appointments with the neurology provider after being in the hospital.

MY STROKE NEUROLOGY APPOINTMENT _____

CARDIOLOGIST: They will pay special attention to your heart and how it may have related to your stroke risk. They will monitor how you may be doing on heart-related medications and any heart tests.

MY CARDIOLOGIST APPOINTMENT _____

MY BLOOD PRESSURE:

(Add the date and your BP in the squares below.)

PHONE CALLS

You will receive follow-up phone calls from Upstate to check on your progress. We are here to help. Your after-stroke care is very important to us.

UPSTATE

COMPREHENSIVE STROKE CENTER



**Learn about
life after stroke.**

RESOURCES

AMERICAN STROKE ASSOCIATION

strokeassociation.org/

CNY STROKE SUPPORT GROUP

upstate.edu/stroke/after_stroke/support-group.php

UPSTATE CONNECT

315-464-8668 or 1-800-464-8668

(available 24/7)

UPSTATE NEUROLOGY STROKE CLINIC

315-464-4243

UPSTATE STROKE CENTER WEBSITE

upstate.edu/stroke/

UPSTATE STROKE REHABILITATION AND THERAPIES

upstate.edu/pmr/healthcare/programs/stroke.php

Thank you for choosing the Upstate Comprehensive Stroke Center for your health care needs. We wish you the best during your recovery. If you have any questions, please call us at 1-800-464-8668.