

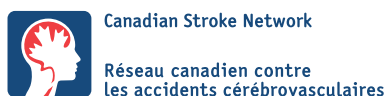


# The Patient and Family Guide to Canadian Best Practice Recommendations for Stroke Care

UPDATED 2011

*Canadian Best Practice Recommendations for Stroke Care* have been developed by stroke experts across the country. These recommendations focus on optimal treatment for stroke patients. This guide provides patients and families with practical information drawn from the recommendations.

Learn more about stroke care in Canada at [www.strokebestpractices.ca](http://www.strokebestpractices.ca)



## Stroke Prevention, Treatment and Recovery: Basic Information for Patients and Their Families

Strokes can be prevented and treated. *Canadian Best Practice Recommendations for Stroke Care* describe how to prevent stroke and how to care for patients with stroke. These recommendations are based on current research. When the *Best Practices* are followed, the impact of stroke can be reduced.

**Be informed | Be involved | Take action**

### KNOW ABOUT STROKE

- Stroke is a medical emergency.
- The faster a possible stroke patient gets to hospital, the better their chances of receiving treatments that could help reverse the effects of the stroke.
- Be familiar with the warning signs of stroke and take immediate action by calling 9-1-1 or your local emergency number.

#### Know the Signs and Symptoms of Stroke:

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**Weakness** — Sudden loss of strength or sudden numbness in the face, arm or leg, even if temporary.

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**Trouble speaking** — Sudden difficulty speaking or understanding or sudden confusion, even if temporary.

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**Vision problems** — Sudden trouble with vision, even if temporary.

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**Headache** — Sudden severe and unusual headache.

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**Dizziness** — Sudden loss of balance, especially with any of the above signs.

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1

## EMERGENCY RESPONSE

- Never drive yourself or the person having a stroke to the hospital. **Call an ambulance.**
- Ask to be taken to the closest hospital that provides expert stroke care.
- You should be seen by doctors and nurses quickly after you arrive at hospital.
- You should receive a brain scan soon after you arrive at the hospital to find out if your stroke was caused by a blood clot or bleeding in your brain.
- If there is a blood clot in your brain, you should be assessed to see if you might benefit from a clot-busting drug (called tPA) that can help re-open blocked arteries. This drug can reduce the severity of the stroke and reverse some of the effects of the stroke. However, it must be given as soon as possible, and no later than four and a half hours after the stroke symptoms started. **Find out if tPA can help you.**
- If you have had a mini-stroke, called a transient ischemic attack or TIA, you need immediate treatment to prevent a major stroke. **Ask about when you will be seen at a stroke clinic if you are not admitted to hospital.**



## STROKE CARE IN HOSPITAL

- You should be seen by a team of health-care professionals who are experts in stroke, preferably in a special unit dedicated to the care of stroke patients.
- If your stroke is caused by bleeding into the brain you may be cared for in an intensive care unit for the first few days after your stroke.
- The stroke team will plan your treatment and rehabilitation needs, and discuss these with you. **Get involved in the plan.**
- You should be assessed to see if you have trouble swallowing. Swallowing difficulties are common after stroke and can lead to choking and pneumonia. Your dietary needs should also be assessed.
- If your stroke was caused by a blood clot, you should be given a blood thinner, like ASA (commonly referred to as Aspirin™), to help prevent more blood clots. **Ask if a “blood thinner” can help you.**
- You should have a special scan to see if the blood vessels in your neck are narrowed or blocked and are a cause of your stroke.
- If your neck arteries are narrowed, you should be assessed to see if you need surgery.
- You should have your blood pressure checked to make sure it is not too high. High blood pressure is the leading cause of stroke. **Know your blood pressure.**
- You should have your blood sugar checked to find out if you have diabetes. Diabetes is an important risk factor for stroke.

*Stroke Care in Hospital continued on next page.*





- It is important to start moving as soon as you are able after your stroke to prevent complications such as pneumonia and blood clots from forming in your legs. You should gradually increase your activity from moving in bed, to sitting up, standing and walking. If you have difficulty moving your limbs or walking, you should also be seen by a rehabilitation therapist for advice and treatment.
- Patients who have had a stroke are at a higher risk for falls. The stroke team should educate you on your risk for a fall, and teach you and your family members how to prevent falls. **Be aware of your fall risk.**
- Before you leave hospital, the stroke team should answer all your questions and help you identify your physical, functional and emotional needs. They should ensure you have a list of all your medications, follow-up appointments, and contact numbers for members of the health-care team in the community and at the hospital. **Have a copy of the discharge plan when you leave hospital. Take this with you to all your appointments. Share your concerns.**



3

## REHABILITATION

- Your rehabilitation team should involve you in deciding what kind of rehabilitation you need and develop a plan just for you. **Get involved in making the plan.** Make sure the team understands what you personally want to accomplish during rehabilitation.
- Ideally, you should receive inpatient rehabilitation therapy on a special rehabilitation unit dedicated to the recovery of stroke patients, or from a specialized community stroke rehabilitation team (often called an Early Supported Discharge Team).
- Continue to talk to your rehabilitation team about your progress, your changing needs, and updating your rehabilitation plan regularly.
- As you progress, the location where you receive your rehabilitation may change, and may include moving to a rehabilitation ward at the same hospital, a separate hospital specializing in rehabilitation, at an out-patient rehabilitation centre, in your home or other community programs. **Ask what rehabilitation setting is best for you.**

*Rehabilitation continued on next page.*

- To achieve the best recovery following a stroke, it is important to practice the exercises and activities you are taught between therapy sessions. The team will work with you and your family to identify the therapy activities you can do on your own. ***Be sure you understand how to safely practice these activities between therapy sessions. Ask Questions.***
- Your mood, memory, ability to handle personal affairs and your ability to think should be assessed. ***Report any changes you notice.***
- Depression is very common after stroke for both patients and their caregivers. It may affect your ability to participate fully in your recovery and slow down your progress. ***It is very important to share your concerns. This is treatable and there is help available for you and your family.***
- Your ability to communicate, use your limbs, walk by yourself, carry out personal care and other daily tasks necessary to safely return home should be assessed. ***Know what changes need to be made in your home to make it safe and accessible.***
- You should work with your health-care team to get ready for your return home. ***Share your concerns about going home, ask all your questions, and make sure you get the answers you need.***
- When returning home, you may require additional help to continue your recovery and receive follow-up care. ***Know what help you may need from others.***
- When you leave hospital, rehabilitation should continue and may occur either in a day hospital, in a clinic, other community services, or at home. ***Know what services are available and how to access them.***
- Rehabilitation, recovery and reintegration into the community can continue for days, months, or years after stroke. ***Know what community services and resources are available to help you.***



- Get a copy of the Canadian Stroke Network magazine "Getting On With the Rest of Your Life After Stroke" at [www.strokebestpractices.ca](http://www.strokebestpractices.ca)



## PREVENTION

- Once you have had a stroke or mini-stroke, the chance of having another one is higher. Know the signs and symptoms and **be prepared** to respond.
- You need to work with health-care providers to develop a plan to deal with the causes that put you at risk of stroke.
- Know your risk factors for stroke and find out how to reduce them. **Take action.** These include:
  - high blood pressure
  - unhealthy diet
  - irregular heartbeat, such as atrial fibrillation
  - high cholesterol (lipids)
  - diabetes
  - lack of exercise
  - smoking
- You may be prescribed medication like ASA (commonly referred to as Aspirin™) or another blood thinner to take every day.
- If you have atrial fibrillation it is very important to be educated about this diagnosis, **follow your doctor's instructions** for taking blood thinner medication, and if required, have your blood levels checked regularly.
- If you smoke, you and your health-care team should discuss options to help you quit smoking. **There are many programs and treatments available that can help you and your health-care team** should provide you with this information and support you through the process. **Quit smoking.**
- Changes to your mood, the onset of depression, or changes to your ability to manage your daily activities can occur at any time during the months after your stroke. **Be aware of these possible changes during your recovery and report them to your health-care team.**
- A combination of lifestyle changes and medications may be necessary to control your blood pressure, diabetes, and cholesterol. **Take control.**



## EDUCATION

If you or a family member has had a stroke or mini-stroke, or if you are at risk for stroke, you should be given key information from health-care professionals at every stage of your care. **Find out:**

- What type of stroke have I had?
- What has the stroke done to me?
- What will my recovery be like?
- What are my physical needs after I leave the hospital?
- What are my emotional needs and those of my family?
- What skills do I need to learn to care for myself after stroke?
- What training is available for my family and caregivers so they can help me?
- What can I do to prevent another stroke?
- How can I access services and support in my community?

Before you leave hospital, you should receive educational materials and information about available services and resources in your community.

- Canadian Stroke Network magazine “*Getting on With the Rest of Your Life After Stroke*”
- Heart and Stroke Foundation’s “*Let’s Talk About Stroke.*”

Ask  
questions,  
get answers.



There is hope after stroke.  
To learn more, visit:

[www.strokebestpractices.ca](http://www.strokebestpractices.ca)

[www.canadianstrokenetwork.ca](http://www.canadianstrokenetwork.ca)

[www.heartandstroke.ca](http://www.heartandstroke.ca)

[www.sodium101.ca](http://www.sodium101.ca)

[www.strokengine.ca](http://www.strokengine.ca)