UW Medicine

Stroke Discharge Education

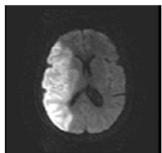
For patients who have had a stroke or are at risk

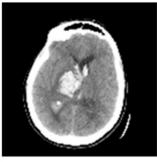
Patient Label Here	What type of stroke did I have?
	Take this handout home with you. It has important phone numbers, websites, and other information. Please share this information with your primary care provider (PCP).
Date:	This handout is for patients who have had a stroke, a stroke-related condition, or are at risk for stroke. It answers common questions about diagnosis, risk factors, and treatment plans to help prevent future strokes.

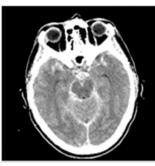
- ☐ An **ischemic stroke** is caused by blockage of a blood vessel (an artery) that brings oxygen and nutrients to the brain. The brain tissue that no longer receives its blood supply can die within a few minutes unless something is done to restore blood flow to all parts of the brain.
- ☐ An **intracerebral hemorrhage** is caused by the bleeding of a blood vessel within the brain. The bleeding causes a blood clot to form in the brain. This prevents normal blood flow and puts pressure on the brain that causes damage.
- ☐ A **subarachnoid hemorrhage** is caused by bleeding around the base of the brain, usually because of an aneurysm. Only about 5% of all strokes (5 out of 100) are subarachnoid hemorrhages.
- ☐ A **venous stroke** (or *venous thrombosis*) is caused by a blockage in a vein that drains blood out of the brain.
- ☐ A transient ischemic attack (TIA) is like a brief, small stroke. In a TIA, blood flow in the artery is blocked or decreased for a short time. This lack of blood causes that part of the brain to stop working properly for a short time. A TIA

may cause the same symptoms as a stroke.

□ **Other stroke-risk condition** or a combination of these conditions.







Brain images



Stroke specialists review images of the brain to help understand the cause of a stroke and how to best treat it.

Call 911

Call 911 right away if you have any of the symptoms listed on the right.

What are my personal risk factors for stroke?

You are at risk for stroke because of the factors checked below:

☐ High blood pressure
☐ Lack of exercise
☐ Cholesterol problems
☐ Atrial fibrillation (irregular heartbeat)
☐ Heavy alcohol use
☐ Drug use
☐ Diabetes
☐ Overweight
☐ Smoking
☐ Clotting disorder
☐ Heart problems
☐ Other

What are the warning signs of stroke?

I will call 911 right away if I have any of these new or worsening stroke symptoms:

- **Sudden weakness or numbness** in my face, arm, or leg, especially if it affects just one side of my body.
- Sudden confusion, difficulty speaking, or having a hard time understanding others.
- **Sudden trouble seeing** in one or both eyes. This may be double vision, tunnel vision, loss of vision, dimness, or a "curtain" going across your eye.
- Sudden trouble walking, dizziness, or a loss of balance or coordination.
- **Sudden, severe headache** with no known cause (worst headache of my life).

How can I reduce my risk of stroke?

I can:

- **Have my blood pressure checked regularly.** If I have high blood pressure, I can take my medicines as prescribed.
- Quit smoking, if I smoke. My healthcare providers can help.
- **Learn to control my diabetes, if I have diabetes.** My healthcare providers can help.
- Control my weight. I can eat healthy food and the right portion sizes.
- Limit or avoid alcohol.
- **Avoid using illegal drugs.** I can ask for help if I think I have a drug problem.
- **Exercise regularly**, as advised by my healthcare providers and physical therapist.



Eating foods that are high in fiber and low in fat and salt will help reduce your risk of stroke.

- **Eat a healthy diet.** I can choose low-salt and low-fat foods and eat plenty of fruits, vegetables, and fiber. I can drink water each day.
- **Control my cholesterol.** I can take my medicines as advised, exercise, and eat foods that have no or low saturated fat.
- **Set personal health goals.** My healthcare providers can help.

If I think I have a heart problem, or my heartbeat is irregular or rapid:

- I will talk with my healthcare provider to find out if I have atrial fibrillation or another heart condition that is related to stroke.
- I will see my PCP for regular healthcare, as advised.
- I will take my medicines as prescribed. I will talk with my healthcare provider or pharmacist if I have any questions about my medicines or possible side effects. I will also:
 - Bring my medicine bottles to all of my healthcare appointments.
 - Request refills at least one week before I run out. I realize that many medicines to prevent a stroke need to be taken long term.

Follow-up Stroke Care and Emergency Action Plan

I understand that having a plan can help me receive the care I need for stroke treatment, recovery, and prevention.

Medical Emergency

I will:

- Call 911 if I think I am having stroke symptoms.
- Tell the operator that I think I am having a stroke, or I will try to say the word "stroke."
- Tell the operator the time my symptoms started, if I can.

Primary Healthcare

I will tell my PCP that I have been in the hospital for a stroke or a stroke-related condition. I understand that I should try to see my PCP within 1 week of going home.

Emergency Action Plan

I will:

- Keep a list of emergency phone numbers handy, including 911 and my family's and PCP's numbers.
- Keep a list of my health conditions, medicines I take, and doses.
- Keep a copy of these lists by my phone and in my wallet or purse. I will always bring a copy to my medical appointments.







A team of stroke specialists at UW Medicine will provide your care.

Questions?

Your questions are important. Call 206.520.5000 if you have questions or concerns.

Call 911 **right away** if you think you are having a stroke.

If I have questions, who do I call?

For Medical Questions

- Stroke is a medical emergency. I will call 911 right away if I have any stroke symptoms.
- For other medical questions 24 hours a day, I will call 206.520.5000. Urgent questions will be directed to a nurse with the Community Care Line or the Stroke Clinic.

For Clinic Appointments, I will call 206.520.5000

My recommended stroke care appointments are listed on my discharge paperwork. I will call 206.520.5000 to confirm all checked appointments, or reschedule if needed:

- ☐ Stroke Neurology Clinic at Harborview (HMC) for appointments to monitor stroke recovery, review treatment plans, and learn about how to control risk factors to help prevent future strokes.
- ☐ Neurosurgery Clinic at HMC or University of Washington Medical Center (UWMC) for appointments to follow up with the Neurosurgery department if I had brain or aneurysm surgery.
- □ Stroke Rehabilitation Care and Therapies (HMC or UWMC) for appointments with Rehabilitation Medicine, speech, physical, or occupational therapies, or vocational counseling to help with rehabilitation after a stroke.
- □ **Neurology Clinic at Northwest Hospital (NWHMC)** for appointments with the Neurology Clinic at Northwest Hospital.

How do I contact Interpreter Services?

Call 206.520.5000. Tell them your language and wait on the line.

Where can I learn more about stroke?

- Visit the UW Medicine Stroke Center at Harborview website for more printable handouts and resources: www.uwmedicine.org/stroke
- Learn about "Life After Stroke" at the American Stroke Association website: www.strokeassociation.org
- Find many resources for stroke survivors and their families at the National Stroke Association website: www.stroke.org
- Read about stroke (in 17 languages) on the National Library of Medicine website: www.nlm.nih.gov/medlineplus/languages/stroke.html
- For more questions, call 206.520.5000 to request a personal call from the Stroke Patient Care Coordinator or Stroke Resource Nurses at the UW Medicine Stroke Center at Harborview.