

Patient name/ID sticker

## **ISCHEMIC STROKE PATIENT DAILY CHECK LIST**

### I. Review medications:

- A. Anti-platelet being given?  Yes  No  
- Anticoagulation should be held in most patients early on – see *Timing of initiation of OAC after ischemic stroke*
- B. Anti-hypertensive agents held for (minimum) first 24-48 hours after stroke onset?  Yes  No  
- Exceptions may be made in pts with AF, acute MI, CHF or other medical reasons to control BP  
- BP should then be *gradually* reduced to <130/<80 with oral agents over several days
- C. Statin being given?  Yes  No If not, why not: \_\_\_\_\_
- D. Blood glucose controlled (goal 140-180)?  Yes  No  
- Oral diabetic meds should be held & SQ insulin used to control BG. Titrate insulin if BG not at goal.

### II. Review work-up

- A. **Vascular imaging** done?  Yes  No Specify:  CTA head and neck  MRA head and neck  carotid U/S
- B. **MRI brain** or **repeat head CT** done?  Yes  No If not, why not: \_\_\_\_\_
- C. Patient on **telemetry**?  Yes  No; Telemetry still indicated?  Yes  No
- D. **TTE with bubble** done if indicated?  Yes  No **TEE** arranged with cardiology if indicated?  Yes  No
- E. **Fasting blood glucose** done?  Yes  No If elevated, HbA1c checked?  Yes  No
- E. **Lipid profile** done?  Yes  No Adjust statin dose if needed.

### III. Consults completed (check box if done and document date/time)

- PT  OT  ST  Physiatry  Smoking cessation counseling  Nutrition  other: \_\_\_\_\_

### IV. General stroke care:

- Can activity level be increased?
- Aspiration precautions being followed?
- Is the patient being fed? NGT should be placed in any stroke patient expected to be NPO for > 24 hours.
- IVF appropriate? Check IV sites for signs of infection.
- D/c Foley if in place
- Patient having bowel movements? Adjust bowel regimen as needed.
- Check for bed sores. Paretic limbs elevated? Heal protectors in place? Wound care needed?
- VTE prophylaxis in place? See *VTE prophylaxis in stroke patients*
- If INR needed, is it ordered for the morning labs?

### Prior to discharge:

- A. Ischemic stroke education provided?  Yes  No
- B. NIHSS and mRS documented on day of discharge?  Yes  No
- C. Anticoagulation started or plan to start anticoagulation in place?  Yes  No
- D. Follow-up arranged with:
- PCP
  - Neurologist
  - Physiatrist
  - Interventionalist
  - Anticoagulation clinic if needed
- E. Any issues delaying discharge? \_\_\_\_\_
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