

**NEW HAMPSHIRE STROKE COLLABORATIVE**

*“Working together to prevent strokes, improve outcomes,  
and inspire hope”*

**Presents the:**

# **Stroke Survival Guide**

**Practical tips and resources for individuals  
affected by stroke.**

**December 2014**



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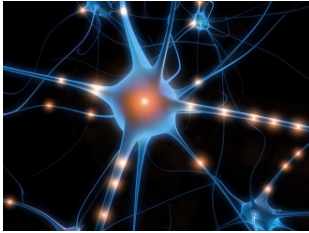
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**The guide is available on line at**

<http://thenecc.org/nhrehabilitation.html>

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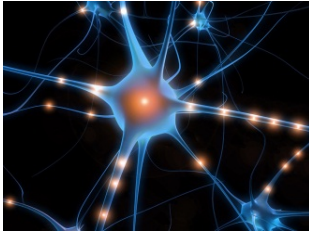


## **Introduction**

Stroke recovery can be a difficult and confusing process for individuals affected by stroke. This guide is meant to help you better navigate the recovery process and prevent another stroke.

This guide provides helpful information and abundant resources.

It is important that you do what you can to prevent another stroke and this Stroke Survivor Guide will help you and your family do just that. Please contact your healthcare provider with any questions you may have about this information.



## **What is a Stroke/Brain Attack**

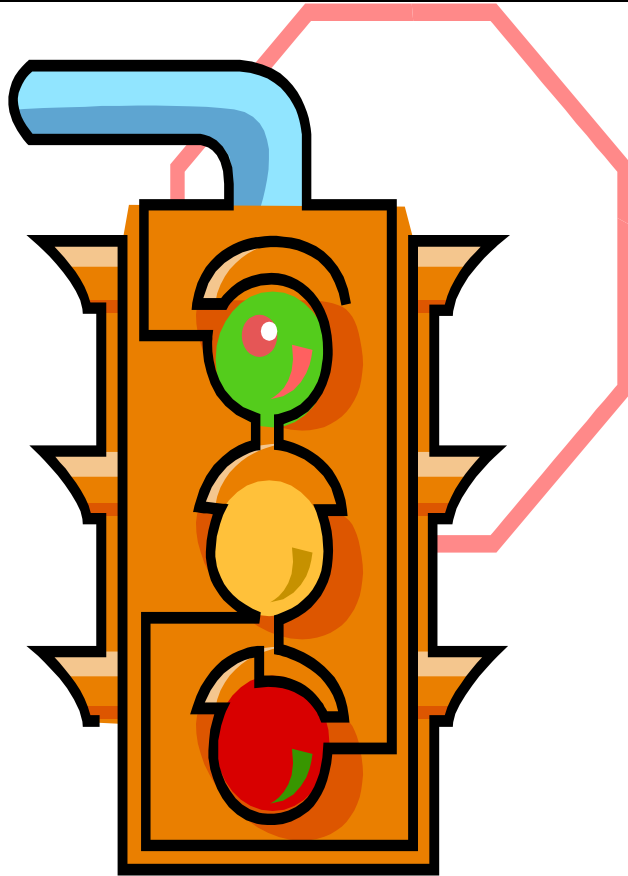
A stroke or “brain attack” occurs when a blood clot blocks the blood flow in a vessel or artery or when a blood vessel breaks, interrupting blood flow to an area of the brain. When either of these things happens, brain cells begin to die.

When brain cells die during a stroke, abilities controlled by that area of the brain are lost. These include functions such as speech, movement, and memory. The specific abilities lost or affected depend on the location of the stroke and on its severity (i.e., the extent of brain cell death). For example, someone who has a small stroke may experience only minor effects such as weakness of an arm or leg. Someone who has a larger stroke may be paralyzed on one side or lose his/her ability to speak. Some people recover completely from less serious strokes, while other strokes can be fatal. (National Stroke Association)



**PATIENT ACTION PLAN FOR STROKE SIGNS & SYMPTOMS**

Purpose: To promote self-directed action for symptoms related to STROKE.



**STROKE ----- Your Plan for Action**

Use this guide to help you report changes on your symptoms to your doctor or nurse. When you report symptoms **early**, you are less likely to have to go to the hospital for treatment.

**GREEN ZONE MEANS:**

- Your symptoms are the same.
- Continue taking your prescribed medicines.
- Follow all your risk reduction strategies.
- Keep physician appointments.

**YELLOW ZONE – CAUTION: CALL YOUR PHYSICIAN IF YOU ARE IN THIS ZONE!**

- Increasing headaches
- Increased weakness or clumsiness of the affected extremity.
- Increased or rapid heart rate.
- Anything unusual that bothers you.
- Taking blood thinners and notice signs of bleeding.

**RED ZONE – “MEDICAL ALERT” CALL 911 IF YOU ARE IN THIS ZONE!**

- Sudden numbness, tingling, or weakness.
- Loss of movement in face, arms or legs.
- Sudden vision changes.
- Sudden trouble speaking or understanding others.
- Sudden confusion.
- Sudden problems walking or balance issues.
- Sudden or severe headaches different than any other headaches.

MD Name & Phone Number: \_\_\_\_\_



# Stroke Risk Scorecard

Each box that applies to you equals 1 point. Total your score at the bottom of each column and compare with the stroke risk levels on the back.

RISK FACTOR	HIGH RISK	CAUTION	LOW RISK
Blood Pressure	<input type="checkbox"/> >140/90 or unknown	<input type="checkbox"/> 120-139/80-89	<input type="checkbox"/> <120/80
Atrial Fibrillation	<input type="checkbox"/> Irregular heartbeat	<input type="checkbox"/> I don't know	<input type="checkbox"/> Regular heartbeat
Smoking	<input type="checkbox"/> Smoker	<input type="checkbox"/> Trying to quit	<input type="checkbox"/> Nonsmoker
Cholesterol	<input type="checkbox"/> >240 or unknown	<input type="checkbox"/> 200-239	<input type="checkbox"/> <200
Diabetes	<input type="checkbox"/> Yes	<input type="checkbox"/> Borderline	<input type="checkbox"/> No
Exercise	<input type="checkbox"/> Couch potato	<input type="checkbox"/> Some exercise	<input type="checkbox"/> Regular exercise
Diet	<input type="checkbox"/> Overweight	<input type="checkbox"/> Slightly overweight	<input type="checkbox"/> Healthy weight
Stroke in Family	<input type="checkbox"/> Yes	<input type="checkbox"/> Not sure	<input type="checkbox"/> No
<b>TOTAL SCORE</b>	<input type="checkbox"/> High Risk	<input type="checkbox"/> Caution	<input type="checkbox"/> Low Risk



## Risk Scorecard Results



**High Risk  $\geq 3$ :** Ask about stroke prevention right away.



**Caution 4-6:** A good start. Work on reducing risk.



**Low Risk 6-8:** You're doing very well at controlling stroke risk!

Ask your healthcare professional how to reduce your risk of stroke.

To reduce your risk:

1. Know your blood pressure.
2. Find out whether you have atrial fibrillation.
3. If you smoke, stop.
4. Find out if you have high cholesterol.
5. If diabetic, follow recommendations to control your diabetes.
6. Include exercise in your daily routine.
7. Enjoy a lower-sodium (salt), lower-fat diet.

Act **FAST** and **CALL 9-1-1 IMMEDIATELY** at any sign of a stroke:

- F** **FACE:** Ask the person to smile. Does one side of the face droop?
- A** **ARMS:** Ask the person to raise both arms. Does one arm drift downward?
- S** **SPEECH:** Ask the person to repeat a simple phrase. Is their speech slurred or strange?
- T** **TIME:** If you observe any of these signs, call **9-1-1 immediately**.

**1-800-STROKES (787-6537) • [www.stroke.org](http://www.stroke.org)**



## How safe is your home?

# HOME SAFETY CHECKLIST

Read the following questions and answer them by checking **YES** or **NO**. **YES** means **SAFE** and **NO** means **UNSAFE** and should be corrected. Asterisk (\*) indicates easy items to correct.

### Kitchen

- Are drawers and cupboards closed to avoid bumping into them?\*
- Is the floor made of a slip resistant material?
- Do floor mats have a slip resistant backing?\*
- Are spills cleaned up quickly to prevent slipping?\*
- Is a washed floor allowed to dry before walking on it?\*
- Are regularly used items reachable without climbing, bending or stooping?\*
- If there is a step stool, does it have a wide leg base, rubber tips, and handrails?
- Is there good lighting around the stove, sink, and counters, but doesn't cause a glare?
- Can you safely carry hot food from the stove to the table?
- Are electrical cords from appliances safely stored and off the floor?\*

### Hallway and Stairs

- Are your railings sturdy, waist high, and easy to grasp along both sides of stairway, including those to the basement?
- Are stairs in good repair?
- Are stairs free of clutter?\*
- Is bright, non-skid tape placed on the top and bottom steps to indicate where they begin and end?
- Are step surfaces non-skid and even?
- Are all carpets and runners secured?
- Are light switches at the top and bottom of the stairs?
- Is the hallway and stairway adequately lit?
- If there is a change in the level between rooms, is it easily seen?

### Bathrooms

- Do the tub and shower have rubber mats, non-skid strips or non-skid surfaces?\*
- Are towels, shampoo, and soap within easy reach?\*
- Is there a grab bar on the wall or the side of the tub or shower, which is both properly installed and designed to hold the weight of a person?
- Is there a tub seat?
- Is there a portable hand held showerhead?
- Is there an appropriate toilet seat and grab bars around the toilet?
- Is the floor slip-resistant? Is it free of loose rugs and loose tiles?
- Is there a way to prevent slippery floors after bathing?
- Are electrical cords from appliances safely stored and off the floor?\*

**Bedrooms**

- Is there a well-lit pathway from the bedroom to the bathroom?\* Yes  No
- Do you have a light or flashlight within easy reach of the bed?\* Yes  No
- Is there a telephone that's easy to reach from the bed?\* Yes  No
- If there are extension cords, are they secured to the wall, not across the floors or under carpets?\*
- Is there something sturdy to hold on to next to the bed to assist in getting in and out? Yes  No
- Are small rugs secured with carpet tape or non-skid backing? Yes  No
- Is there a bedside table for glasses, books, etc rather than cluttering the floor beside the bed? Yes  No
- If a cane or walking device is needed, is it kept at hand but not in the way?\*

**Living Room/General Living Areas**

- Are the carpets flat and in good condition? Yes  No
- Are small rugs and runners secured with carpet tape or non-skid backing? Yes  No
- Is the furniture placed to allow wide walkways?\*
- Are walkways clear of tripping hazards such as low furniture, grandchildren's toys and electrical and telephone cords?\*
- Are chairs and sofas high enough for easy sitting and standing? Yes  No
- Are the chairs and tables stable enough to support weight if leaned on? Yes  No
- Is there adequate light when entering each room/area? Yes  No

**Entrances and Outdoor Walkways**

- Are the outdoor stairs and walkways free from cracks, dips, obstacles, leaves, ice, snow and holes? Yes  No
- During the winter, is sand and/or salt available for slippery surfaces to ensure safety? Yes  No
- Do the stairways have secure handrails? Yes  No
- Is the entrance well lit at night? Yes  No

**Additional Home Safety Questions**

- Is there a way to access Emergency Services in each room if you fall or need help, for instance by phone, pull cord, or personal alert device? Yes  No
- Is the hot water temperature set to 120 degrees or lower to avoid scald burns? Yes  No
- Is there at least one working smoke detector on each level of the home and near each bedroom? Yes  No
- Are smoke detectors tested monthly?\*
- Are the batteries replaced twice a year?\*
- Is there a carbon monoxide detector on each level of the home? Yes  No
- Is there a fire extinguisher in the home? Yes  No
- Are emergency phone numbers beside each phone?\*
- Are fireplaces protected by a screen or glass door? Yes  No

**ACTION PLAN**

Please indicate areas needing attention. Include a brief correction plan and if an alteration has been made.

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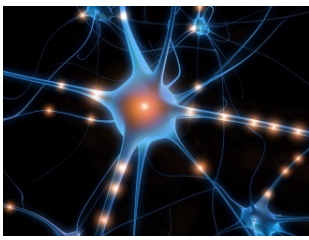


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## Post Stroke Rehabilitation

Rehabilitative therapy begins in the acute-care hospital after your overall condition has been stabilized, often within 24 to 48 hours after the stroke.

At the time of discharge from the hospital, you and your caregiver will work with hospital social workers to determine the most suitable level of rehab. Your recovery may include rehab in one or more of the following settings:

### **Acute Inpatient Rehabilitation**

Provides:

- Medical care from a doctor that will take care of your medical needs: you will see them almost every day during the week
- Nurses who are specialists in caring for your nursing and rehabilitation needs
- A team of therapists including physical therapists, occupational therapists, speech therapists, recreational therapists, psychologists and brace and wheelchair specialists working together to meet all of your needs
- Therapy up to at least 3 hours per day, 5-7 days per week

### **Skilled Nursing Facility/Inpatient:**

Provides:

- About an hour and a half of therapy a day; 5-7 days per week
- A slower paced, longer term rehab program
- A team of therapists including Physical therapists, Occupational therapists and Speech therapist
- A physician that will see you once a week

### **Outpatient**

Provides:

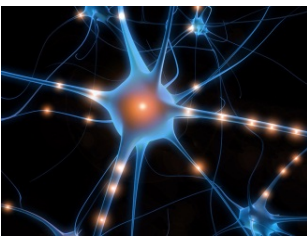
- Individuals with several hours, often 3 days each week, at the facility taking part in coordinated therapy sessions
- At times treatment programs similar to those of inpatient facilities, but they also can offer less demanding regimens, depending on your endurance
- Physical therapy, Occupational therapy and Speech therapy to address your remaining functional limitations

### **Home Health Care**

Provides:

- Participation in an intensive level of therapy several hours per week or follows a less demanding regimen
- Nursing, Physical therapy, Occupational therapy, Speech therapy, social workers and aides to assist with your personal care
- The advantage of practicing skills and developing strategies in your own living environment





## Links to Useful Information and Resources

### [American Stroke Association \(ASA\)](#)

Our mission is to build healthier lives, free of cardiovascular diseases and stroke. That single purpose drives all we do. The need for our work is beyond question.

<http://www.strokeassociation.org/STROKEORG/>

### [American Stroke Foundation \(ASF\)](#)

To empower stroke survivors and their families to overcome ongoing challenges of life after stroke and rejuvenate their lives.

<http://www.americanstroke.org/>

### [The Brain Attack Coalition \(BAC\)](#)

The Brain Attack Coalition is a group of professional, voluntary, and governmental entities dedicated to reducing the occurrence, disabilities, and death associated with stroke. The goal of the Coalition is to strengthen and promote the relationships among its member organizations in order to help people who have had a stroke or are at risk for a stroke.

<http://www.stroke-site.org/>

### [The Brain Injury Association of America \[www.biausa.org\]\(http://www.biausa.org\)](#)

The mission of the Brain Injury Association of America (BIAA) is to advance brain injury prevention, research, treatment and education and to improve the quality of life for all people affected by brain injury. We are dedicated to increasing access to quality health care and raising awareness and understanding of brain injury. With a network of state affiliates, local chapters and support groups, we are the voice of brain injury.

### [Brain Injury Association of New Hampshire.](#)

The Brain Injury Association of New Hampshire is the only state-wide organization in New Hampshire dedicated to brain injury and stroke support, prevention, education, and advocacy for survivors and caregivers.

<http://www.bianh.org/>



## **Links to Useful Information and Resources Continued**

### [Centers for Disease Control and Prevention \(CDC\), Division for Heart Disease and Stroke Prevention](#)

CDC's Division for Heart Disease and Stroke Prevention works to improve cardiovascular health through public health strategies and policies that promote healthy lifestyles and behaviors, health environments and communities, and access to early and affordable detection and treatment

<http://www.cdc.gov/dhdsp/>

### [The Hazel K. Goddess Fund for Stroke Research in Women](#)

The Goddess Fund was created with one clear and compelling goal: to eliminate the impact of stroke in women's lives, the lives of their families, and society at large.

<http://www.thegoddessfund.org/>

### [The Internet Stroke Center](#)

The Internet Stroke Center's mission is to advance understanding of stroke research and clinical care. Our goal is to provide current, professional, unbiased information about stroke.

<http://www.strokecenter.org/>

### [National Institutes of Neurological Disorders and Stroke \(NINDS\) Stroke Information Page](#)

The mission of the National Institute of Neurological Disorders and Stroke is to reduce the burden of neurological disease—a burden borne by every age group, by every segment of society, by people all over the world.

<http://www.ninds.nih.gov/disorders/stroke/stroke.htm>

### [National Stroke Association \(NSA\)](#)

National Stroke Association's mission is to reduce the incidence and impact of stroke by developing compelling education and programs focused on prevention, treatment, rehabilitation, and support for all impacted by stroke.

<http://www.strokenetwork.org/>

### [ServiceLink Aging and Disability Resource Center](#)

ServiceLink provides information so that you can access and make connections to resources you need to make informed choices and live independently in your community.

<http://www.nh.gov/servicelink>



## Links to Useful Information and Resources Continued

### [The Stroke Network, an on-line stroke support group](#)

An on-line stroke support network of stroke information. Message board and chat on-line for stroke survivor and stroke caregiver support.

<http://www.strokenetwork.org/>

### [Support Group Finder - American Stroke Association](#)

<http://www.strokeassociation.org/strokegroup>

