

McLaren Print System Order

Order No: 74234
 Order Date: 2022-12-20
 User: Hannah Summerfield
 Phone: 5179757311

Ship Location: McLaren Lansing - Atten: Hannah Summerfield Stroke Coordinator, Office: 1-231
 2900 Collins Rd
 Lansing, Mi 48910

Brochures
 Quantity: 8
 Paragon Dept No: 21620
 Dept Name: Neurology
 Company Number: 210

Order Total Price: 64.00

Item Number: MHCC-547
 Item Description: Stroke Plan of Care Poster
 Revision Date: 08/2022
 Print:
 Paper:
 Size:
 Fold:
 Finish:
 Drill:
 Poster: 12x18 laminated
 Misc Info:

STROKE PLAN OF CARE McLaren

When to Initiate Individualized Plan of Care (IPC):

- On admission of patient with diagnosis or suspected diagnosis of TIA or Stroke (Ischemic or Hemorrhagic)
- Patient's admitted with risk of Stroke, unless it has been ruled out as other diagnosis.
- After an Inpatient Stroke Alert.
- After imaging with incidental findings of a stroke.
- Once atherosclerosis or hemorrhagic risk is completed.

When to do Yale Swallow Screen (Nursing Swallow Screen):

- Done or bedside by RN before any PO intake.
- Document in the Stroke Quality Documentation tab.
- Document pass or fail, date/time and give RN's name.
- If patient passes, patient can be on regular diet and liquid.
- If patient fails, make patient NPO and order SHRN/OT (EVAL, AND) 186242
- Modify diet and liquid consistency in practicing outside RN's scope.

My Patient with a Stroke Failed Swallow Screen... Now What?

- The order should automatically generate if "fail" is documented in the Stroke Quality Documentation tab.
- If the order is not generated, search swallow.
- Select the Speech SLP Adult Swallow Swallow Eval and Treat.
- Place in comments that patient is NPO for meals pending the swallow evaluation.
- After completion of the swallow evaluation, receive recommendations from the Speech Language Pathologist regarding individualized patient safe swallow strategies and diet modification if needed.

Appropriate PowerPlan should be in place to ensure all Stroke Core Measures are met.

- Neuro Ischemic Stroke/TIA with or without atherosclerosis admit or focus.
- Neuro Ischemic Stroke/TIA admit atherosclerosis lipid initiation and follow-up orders.
- Neuro Hemorrhagic Stroke admit or focus order.

STK Metrics

- VTE Prophylaxis by hospital day 2
- Discharge home on anticoagulant medications
- Anticoagulation for current or history of atrial fibrillation
- Thrombolytic therapy
- Anticoagulant therapy by hospital day 2
- Discharged home on a stable intense statin (LDL > 100)
- Stroke Education
- Assessment for falls
- Cyberpage screening
- Intense statin therapy for LDL over 70

Stroke/TIA/Isk Out Any risk of CVA	Every 1 hour x 4 hours Every 2 hours x 4 hours Every 4 hours until discharge	Every 1 hour x 4 hours Every 2 hours x 4 hours Every 4 hours until discharge	Admission Every 30 min until discharge PRN with any hours changes
CI/Stroke/Stroke Hemorrhagic	Every 1 hour for 24 hours Every 4 hours until discharge	Every 1 hour for 24 hours Every 4 hours until discharge	Admission Every 30 min until discharge PRN with any hours changes
Patients that received attention	Every 15 minutes for 2 hours Every 30 minutes for 8 hours Every 1 hour for 16 hours	Every 15 minutes for 2 hours Every 30 minutes for 8 hours Every 1 hour for 16 hours	Baseline Post Stroke Post Discharge once a shift

*Call 2-3-0-0-2 and initiate a Stroke Alert if there is a neurological decline or change in NIMS of 4 or more.

Spec Info: This is to go to McLaren Greater Lansing. Please contact me at Hannah.Summerfield@mclaren.org with any questions.