

## McLaren Print System Order

Order No: 86335  
 Order Date: 2024-06-18  
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Ship Location: East Medical Mall Attn: Laura Love  
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Brochures  
 Quantity: 12  
 Paragon Dept No: 17605  
 Dept Name: Community Health Services  
 Company Number:

Order Total Price: 96.00

Item Number: MHCC-547  
 Item Description: Stroke Plan of Care Poster  
 Revision Date: 06/2024  
 Print:  
 Paper:  
 Size:  
 Fold:  
 Finish:  
 Drill:  
 Poster: 12x18 laminated  
 Misc Info:

**STROKE PLAN OF CARE** McLaren

**When to Initiate Neuro Power Plan and Stroke Quality Documentation**

- On admission of patient with diagnosis or suspected diagnosis of TIA or Stroke (Ischemic or Hemorrhagic)
- Patient is admitted with code of Stroke, unless Stroke has been ruled out for another diagnosis
- Following an Inpatient Rapid Response/Code Stroke Activation
- After imaging with incident/bedside of a Stroke
- Thrombolysis administered for suspected stroke
- Following evaluation for any high-risk vascular procedure

**When to do Yale Swallow Screen (Bedside Swallow Screen):**

- To be completed by RN within 4800 minutes of suspected stroke work-up if it is discharge and 72 hours otherwise unless stroke is Hemorrhagic
- Swallow screen prior to administering any PO medications
- Record result of swallow screen in stroke quality documentation based on all five items
- Document name on fall and ensure time is correctly entered. Completion time documented prior to any and results in reports
- If patient unable, patient may advance date and reports per provider order

**My Patient has Failed Their Swallow Screen... Now What?**

- Keep NPO!
- Do not order alcohol automatically, greatest if "not" is documented in the Stroke Quality Documentation Tab
- If the order is not generated, search swallow
- Select the Report: RN-RN-RN-RN-RN Swallow Eval and Post
- Place in comments that patient is NPO for needs pending the swallow evaluation
- After completion of the swallow evaluation, review recommendations from the Speech Language Pathologist regarding individualized patient with swallow challenges and add modifications if needed
- Modifying diet and liquid consistency is outside of RN scope of practice

**Stroke Care Measures Embedded Within the Following Power Plans:**

- Neuro Ischemic Stroke TIA was Thrombolysis (Stroke or Power Plan) (Optimal)
  - NIH Penetration Assessment Swallow Screen/TIA
  - Thrombolysis infusion and follow up orders
- Neuro Hemorrhagic Stroke (Stroke or Power Plan)
  - NIH Penetration Assessment Swallow Screen/TIA
  - Stroke/Stroke/TIA
- Stroke/TIA/Stroke/TIA
- Stroke/TIA/Stroke/TIA

**Required Stroke Quality Measure**

- VTE Prophylaxis by hospital day 2
- Discharge home on antithrombotic medications
- Anticoagulation for current or history of atrial fibrillation
- Thrombolysis Therapy within 1 hour of arrival
- NIHSS within 10 hours of arrival
- Antithrombotic therapy by hospital day 2
- Assessed for Rehab
- Discharge home on a state license state F/G/H, or TIA
- Documentation of Stroke Education
- Spitting/speaking screening before PO
- Local panel EKG within 48 hours of admission
- Discharge/transfer (DNI) completed prior to discharge or within 30 days of admission
- Case Management Eval and Follow Up

Power Plan	Vitals	NIHSS	NIH Handoff
Stroke/TIA/Stroke/TIA	Every 1 hour until provider changes to Every 2 hours until discharge	Every 1 hour until provider changes to Every 2 hours until discharge	Admission/Line Transfer Every 30 min until discharge PMS with any team changes
Patient that received Thrombolysis	Every 15 minutes for 1 hour Every 30 minutes for 4 hours Every 1 hour for 16 hours Q4 hours until discharge	Every 15 minutes for 1 hour Every 30 minutes for 4 hours Every 1 hour for 16 hours Q4 hours until discharge	Admission/Line Transfer Every 30 min until discharge PMS with any team changes

Initiate a Rapid Response/Code Stroke Activation per facility Stroke Algorithm for any new sudden onset of neurological deficits or a change in NIHSS of 1 or more.

Spec Info: cc# 17605 is Library Services, Neuroscience Fund