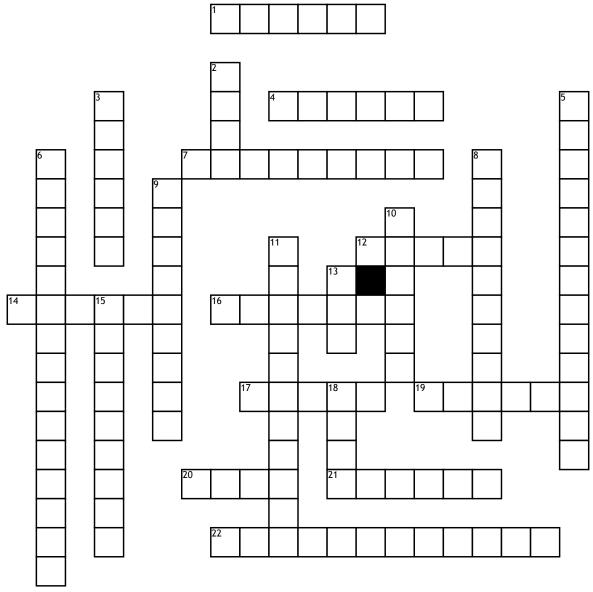
## 2018 End of Year Stroke Education



## <u>Across</u>

- Enter the stroke smart\_ into patient's dischage instructions to document their personal risk factors for stroke were individualized
- 4. Patient will be transported to here ASAP during a Stroke Team Activation. The goal is to have this completed and read within 45 minutes.
- **7.** An important part of patient education used to validate understanding
- 12. frequent assessment done on a stroke patient
- 14. Core Measure teaching tool given to the patient on admit
- a modifiable risk factor that doubles the risk for stroke, Pharmacy can be consulted for cessation education

- 17. Stroke scale charge nurses are certified in, abbreviation
- 19. Color of the checklist in the Stroke Core Measure folder, must be completed throughout patient's stay and turned into Becky at discharge
- 20. The acronym used to rapidly
- 21. I should check that my stroke patient this ordered unless they are allergic
- from behind the 22. I grab the \_ charge nurse on 5MS if I suspect my patient is having a stroke

## **Down**

- 2. the stroke binder has this color to identify it
- 3. A stroke affecting this cerebral artery may present symptoms of aphasia and facial weakness

- 5. the last time a patient was "normal"
- 6. A patient must be discharged on this if they have atrial fib
- 8. Obtain this if we are calling a stroke alert on our unit
- 9. The Stroke Team Activation
- is found on the first page in identify acute stroke signs and symptoms the stroke binder
  - 10. This needs to be accurately documented for TPA dosing
  - 11. Karen Gonzalez is the stroke
  - **13.** Occurs when the blood supply to the brain is blocked for a short time, causing a "temporary malfunction"
  - 15. Screening done at admit, determines the need to keep patient NPO
  - 18. Anti-embolic devices that should be documented in the Daily Cares/Safety flowsheet