

Kim Kenney, MSN,
RN, BS, CCRN

STROKE: WHAT'S NEW?



OBJECTIVES:

- Learn latest Stroke updates
- Recognize “Time is Brain”
- Key Points Pre-Hospital
- Think “ BE FAST”



WHAT'S NEW THIS YEAR?

(PUBLISHED 1/24/2018)

WATCHING THE CLOCK

By AMERICAN HEART ASSOCIATION NEWS

Under new treatment guidelines, people having mild strokes can now be considered for a medication given within several hours to help dissolve a clot. Clot-snaring devices can also now be used up to 24 hours after the start of a stroke in some patients with clots blocking a large vessel in the brain.



0 MINUTES

Onset of stroke symptoms

WITHIN 3-4½ HOURS

Clot-dissolving drug alteplase for mild and severe strokes

WITHIN 6-24 HOURS

Mechanical thrombectomy with stent retrievers for large-vessel clots

*Source: American Heart Association/American Stroke Association
Published: Jan. 24, 2018*

FRONT OF MIND:



➤ Most Important:

➤ Determine time of onset

- When was the patient last KNOWN well?
- Med List – Any anticoagulants?

➤ Primary Goals for First Responders:

- Load and Go
- Know Signs and Symptoms
- Call Ahead
 - ED will be ready
 - Directly to CT scanner
- Work as part of the team

➤ Transport Quickly to Stroke Center

STROKE CENTERS:

- Three Types:
 - Acute Stroke Ready
 - Can give TPA & Transport
 - Primary Stroke Center
 - Can give TPA & Keep Pt.
 - Comprehensive Stroke Center:
 - Can provide endovascular treatment
- Stroke Centers: 26 in Wisconsin
 - 3 Comprehensive:
 - UW Health
 - Froedert
 - St. Luke's

REMEMBER TO “BE FAST”

- B: Balance Lost
- E: Eyes: Vision Difficulty

- F: Face Drooping
- A: Arm Weakness
- S: Speech Difficulty
- T: Time to call 9-1-1

REMINDERS:

Longer time since symptom onset:

- Worse Outcome
- Increased Risks

Key:

- Transport ASAP to Stroke Center
- Transporting: doesn't mean patient will receive TPA or even be a candidate.
- Transporting: essential to get the patient to earlier assessment and possible treatment.

STROKE: OVERVIEW 2018



POWTOON: KEY POINTS:

- Basics:
 - Brain imaging: Scan within 20 min. of arrival
 - Goal: 60 min or less door-to-needle time
 - From Onset:
 - Alteplase: within 3 hours and in select patients up to 4 ½ hours
 - Thrombectomy: w/in 24 hrs.



POWTOON:
KEY POINTS:

BP Management:

- **Overall:** Do Not Treat blood pressure unless $> 220/120$
- Need CT scan to determine if there is a hemorrhage

KEY TAKE-AWAYS:

EMT, PARAMEDIC, RN PRE-HOSPITAL/ED & RN INPATIENT

- **EMT: Paramedic:**
 - **Quick Transport: Time Is Brain!**
 - **Correctly establish the last known well time.**
 - **Call ahead to the ED**
 - **Work as part of the team**
- **Pre-Hospital/ED RN & Inpatient RN:**
 - **Time is BRAIN!**
 - **Know signs & symptoms**
 - **Recognize changes**
 - **Work as a team**
- **ALL: Always “Be FAST”**



Q&A

QUESTIONS?

You have

Questions

We have

Answers

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- Nicole Bennett, MSN, CNS, Stroke Program Coordinator. nbennett@uwhealth.org
- Christine M. Whelley, MSN, RN, FNP-BC, CNRN, SCR.N. cwhelley@uwhealth.org