

Stroke or TIA

Getting Ready to Learn about Stroke or TIA (mini stroke)

Learning something new can be hard when you are not feeling well. Here are some good things to tell the staff:

- Who do you want to learn with you? We would like to have someone who will be helping you at home learn with you.
- What is the best way for you to learn? Do you learn best by reading a book or pamphlet? Or do you learn best by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

Because this teaching is about your health, the staff may explain something more than once and give you information in “small” pieces over several days.

By the time, I leave the hospital I will be able to tell the staff:

- How my life has changed because of a stroke or TIA (mini stroke)
- The symptoms of stroke.
- What to do if I have the symptoms of stroke.
- What I need to do to get well.
- What I need to do to lower my risk of having another stroke or TIA.
- What barriers I have to making the changes to lower my risk for stroke.
- What medicines I may take to help lower my risk of stroke.

The staff will use three questions and answers to teach me about Stroke or TIA:

1. What is my main problem?
2. What do I need to do?
3. Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show them what I have learned. They want to make sure that I know about my disease and how to take care of myself.

What is my main problem?

My life has changed because I have had a stroke or TIA (mini-stroke). I may experience some of the following:

- Difficulty moving my arms or legs the way I used to due to weakness or balance.
- Numbness.
- Problems talking or understanding what others are saying.
- Problems thinking clearly or remembering things.
- Problems with vision.
- Difficulty swallowing

My brain does not know how to do some things after a stroke. This is because the blood flow to part of my brain has changed. When the brain does not get blood, the cells begin to die. This could result in problems with speech, movement and memory. Some people recover completely after a stroke. Most people have some disability after a stroke.

What do I need to do?

Know the signs and symptoms of stroke and what to do if they occur again.

- Sudden numbness or weakness of the face, arm, or leg. It may only affect one side of my body.
- Sudden severe headache with no known cause.
- Sudden trouble seeing in one or both eyes.
- Sudden confusion, trouble speaking, or understanding.
- Sudden trouble walking, dizziness, or loss of balance and coordination.

Call 911 if I am having any symptoms of stroke! I will not drive myself or have a loved one drive me.

- Tell emergency medical personnel when my symptoms started
- Every minute that passes puts my brain at risk for further injury. This is why it is very important to call 911 right away.
- Having emergency medical personnel help in getting me to the hospital makes the trip safer for me and others.
- They can also help with any problems I may have on my way to the hospital, such as problems breathing and chest pain.
- They will also tell the hospital my symptoms before I get there and the hospital can be ready faster.

Know what I need to do to get better from a stroke.

- Understand that everybody heals differently.
- Understand that recovery takes time.
- I will need support from my family and friends.
- I may need therapy to help me get back some of my lost function.
 - Physical therapy can help me get back the use of my arms and legs.
 - Occupational therapy can help me learn how to live as independently as possible.
 - Speech therapy can help me communicate with others or help with swallowing problems.

Know the risk factors & how I can lower my risk of having another stroke (see the Stroke Patient Education Guide) **or TIA.**

- Each person is different and has different risks for having a stroke.
- The National Stroke Association developed a tool to help my family and I know about our risk for stroke.
- I can find the stroke risk assessment in the Stroke Patient Education Guide I was given.
- I should take time to fill this out and share the tool with my family.
- I can read about changes I can make to lower my risk in the Stroke Patient Education Guide.

The most important ones I can change are:

High blood pressure

- The foods I eat can help keep my blood pressure low.
 - Limit the amount of sodium and salt in my diet.
 - Read food labels for sodium content. Avoid or limit foods with more than 300 mg of sodium per serving.
 - Do not add salt to foods when I cook or at the table.
 - Be careful when eating at a restaurant. Choose foods that are naturally low in sodium. Many restaurants have special menu items that are prepared with little or no salt.
- Include foods that are rich in potassium in my diet (unless not allowed due to other medical conditions)
 - Include at least 5 servings of fruits and vegetables in my diet every day.

- ❑ Diabetes
 - Work to control your blood sugar levels through diet, exercise, and medicine if given by your physician.

- ❑ Overweight (see the Stroke Patient Education Guide)
 - Exercise regularly.
 - Stay at a healthy weight. Eat a diet that is high in fruits and vegetables. Avoid high-fat foods.
 - I can ask my doctor or dietician what is a healthy weight for me.

- ❑ Irregular heartbeats (atrial fibrillation)
 - Atrial fibrillation is an irregular heartbeat that can lead to blood clots forming in your heart and traveling to your brain. If you have atrial fibrillation, follow your doctor's plan.

- ❑ Drinking
 - Limit the amount of alcohol you drink.
 - Women should drink no more than one drink per day.
 - Men should not drink more than two drinks per day.
 - One drink is 12 ounces (oz) of beer, 5 oz of wine, or 1½ oz of liquor.

- ❑ Smoking
 - Stop smoking. There are many ways to help you quit.

- ❑ High cholesterol
 - The foods I eat can help keep my blood cholesterol at healthy levels.
 - Limit the amount of fat in my diet to less than 25-35% of my total calorie intake.
 - Limit saturated fats such as fats in meat, poultry, and high-fat dairy foods. Use low-fat or fat-free dairy products. Use lean cuts of meat and trim visible fat.
 - Limit hydrogenated fats or trans-fats. These are fats found in fried foods, crackers, cookies and chips.
 - Include foods in my diet that are high in omega-3 fatty acids. These foods include walnuts and other tree nuts, and flaxseed oil. These also include cold-water, fatty fish such as salmon and tuna.
 - My cholesterol intake should be 200 mg or less.
 - Include foods that are high in fiber in my diet. These foods include fresh fruits and vegetables, foods made from whole grains, dried beans and peas. Aim for 20 grams of fiber each day.

If I have questions about what to eat, I can ask my doctor to refer me to an outpatient dietitian. I can make an appointment with an outpatient dietitian by calling 269-341-6860.

Risk factors I cannot change:

- Gender (males are at a higher risk)
- Race (African Americans are at higher risk)
- Family history of stroke
- Personal history of stroke

Address barriers to lifestyle changes

- Barriers to lifestyle changes may make it hard for me to reach my goals.
- I need to know what the barriers are for me.
- I need a plan to get rid of the barriers.
- I need to talk about these barriers my healthcare team.
- These are the barriers I see in making the lifestyle changes my healthcare team has discussed with me:

Know what medicines are used to help prevent stroke. Not everyone needs every medication listed below.

- Blood pressure medicines** help keep my blood pressure low. This helps my heart and my blood vessels work better.
- Cholesterol-reducing medicines** help lower the amount of cholesterol in my blood. This helps prevent a stroke.
- “Blood thinners”** help prevent a stroke by stopping clots from forming in my blood.
- Antidepressants – add words from book.

- I know that I must take my pills every day, the way the doctor told me to, so they will work.
- Identify ways to control my pain.** Pain can happen for many reasons and be mild or severe. There are many different ways to treat your pain from medicines to relaxation techniques. Everyone experiences pain differently and what works for someone else may not work for you. Some ways to help control pain are listed in the stroke patient education guide.

Why is this important to me?

- Importance

I have had a stroke or a TIA. That means I am more likely to have a stroke in the future. I can help prevent a stroke by doing what I have learned here. I know that getting help immediately if I have stroke symptoms may lessen the effects of the stroke on my body.

As part of my care I have received this education plan. I may also receive:

- Stroke Patient Education Guide
- Stroke or TIA Discharge Orders and Instructions
- Information about diet
- Smoker's quit book
- Diabetes education book

Bronson has a stroke support group available for you and your family if you would like to join in some of the meetings.

Bronson Methodist Hospital Stroke Survivor Support Group
Bronson Gilmore Center for Health Education
601 John St., Kalamazoo
(269) 341 7500

Parking is available in the Jasper Street Parking Ramp.

The Stroke Support Group meeting is held the third Thursday of the month from 11:00 a.m. to noon (except in July and August).

Stroke or TIA (a mini stroke) Education Plan

Resources for Staff

- [Stroke: Diagnosis: Nursing Reference Center](#)
- [Stroke: Risk Factors -- an Overview: Nursing Reference Center](#)
- [Stroke: an Overview: Nursing Reference Center](#)
- Stroke Patient Education Guide
- LexiComp

Teaching Tools

- Stroke Education Plan
- Stroke Patient Education Guide
- TIA, Acute stroke Discharge Orders and Instructions
- Smoking Cessation Book
- Diabetes Education Guide
- [Diet Information for Stroke Patients](#)
- [Diet Information for TIA Patients](#)

References:

- National Stroke Association. www.stroke.org
- American Stroke Association. www.strokeassociation.org

Approved by:

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