

## Stroke Smart Medical Practice Initiative

### Spot a Stroke – Stop a Stroke – Save a Life

Tragically, one in three stroke patients first call their medical provider rather than 911 to request an office appointment because they do not recognize the medical emergency.<sup>1</sup> This unnecessary delay can result in death or a lifetime disability for the patient. The **Stroke Smart Medical Practice** initiative aims to educate the public and medical office staff to recognize patient stroke signs and encourage calling 911 if they present. Through adopting (5) actions at a medical facility, we can save lives and reduce disability from strokes.

- *Train all office staff to spot strokes and follow practice protocol (30-minute video available)*
- *Provide Stroke Smart educational materials to all patients (free materials available on VDH website)*
- *Identify high risk patients and provide (intentional) Stroke Smart education*
- *Incorporate a Stroke Smart script in voicemail and instruct calling 9-1-1 (suggested action)*
- *Measure Stroke Smart impact at practice level*

#### 1. Train office staff

- ❖ Educate **all staff**, especially those who answer phones, on stroke signs and the practice protocol to employ when a stroke sign is suspected in a patient. *Note: A 30-minute video is available to provide this education.*
- ❖ Display *Stroke Smart* poster in the front desk area as a staff work aid to help identify patient stroke signs.
- ❖ Ensure any *new* front office staff are trained in stroke signs and office protocol after they join.

#### 2. Provide Stroke Smart education to patients *Materials referenced below are available on VDH website*

- ❖ Display Stroke Smart wallet cards and magnets (English and Spanish available) at the front desk, waiting rooms, and/or exam rooms for patients to readily access. Encourage distribution at check-in/out.
- ❖ Provide a supplemental letter to patients describing the initiative, stroke signs and actions, and direct them to ask their nurse if they would like further education.
- ❖ Display Stroke Smart poster(s) in exam rooms, elevators, and other patient accessible areas.
- ❖ Loop Stroke Smart patient training video in waiting areas, telemedicine holds, or display as a QR code

#### 3. Identify high risk patients and provide intentional Stroke Smart education

- ❖ Identify patients at high risk for stroke and have a nurse (or health care staff) present them with a *Stroke Smart* wallet card and magnet accompanied by a simple explanation of the signs. Encourage patients to take extras and distribute them to family, coworkers, and friends.
  - Tools such as the American Heart/American Stroke Association “*Stroke Risk Quiz*”, National Stroke Association “*Stroke Risk Scorecard*”, or an EHR system “flag” are tools to identify those at high risk

#### 4. Stroke Smart voicemail/after hours (suggested action)

- ❖ Incorporate stroke information into the office voicemail system (daytime and after-hours) or loop in system announcements for patients on hold during a call

#### 5. Measure Stroke Smart impact (at practice level)

- ❖ Identify metrics to assess effectiveness of Stroke Smart initiative at the practice level
- ❖ Possible metrics include # of magnets/wallet cards distributed to patients, % of staff trained, # of calls for appointment intercepted, etc.

**Access Stroke Smart resources on the Virginia Department of Health website: [www.vdh.virginia.gov](http://www.vdh.virginia.gov) (keywords: Stroke Smart)**

<sup>1</sup> Reasons for Prehospital Delay in Acute Ischemic Stroke Joachim Fladt, MD, et. al, Journal of the American Heart Association, October 2019; <https://www.ahajournals.org/doi/10.1161/JAHA.119.013101>