

Stroke Survival Guide



Practical tips and resources for individuals affected by stroke

*Working together to prevent
strokes, improve outcomes,
and inspire hope.*



NEW HAMPSHIRE STROKE COLLABORATIVE

*“Working together to prevent strokes, improve outcomes,
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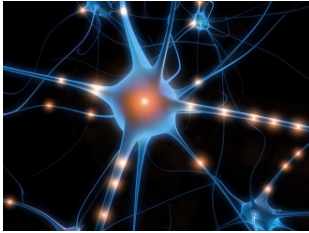
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The guide is available on line at

<http://thenecc.org/nhrehabilitation.html>

October 2019

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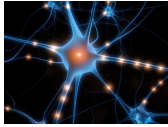


Introduction

Stroke recovery can be a difficult and confusing process for individuals affected by stroke. This guide is meant to help you better navigate the recovery process and prevent another stroke.

This guide provides helpful information and abundant resources.

It is important that you do what you can to prevent another stroke and this Stroke Survivor Guide will help you and your family do just that. Please contact your healthcare provider with any questions you may have about this information.



What is a Stroke?

Stroke is an event that affects the arteries of the brain. A stroke occurs when a blood vessel, bringing blood to the brain, gets blocked or ruptures (bursts). This means the area of the brain, the blocked or ruptured blood vessel supply, can't get the oxygen and nutrients it needs. Without oxygen, nerve cells can't function.

Your brain controls your ability to move, feel, think and behave. Brain injury from stroke may affect any of these functions. Several factors affect the ways people experience a stroke. These include; the location of the blocked vessel that is affected, the area and extent of the stroke, and the type of stroke, ischemic vs. hemorrhagic. An Ischemic stroke occurs when a clot blocks an artery in the brain. The artery becomes narrowed or clogged, cutting off blood flow to the brain cells. Ischemic strokes are the most common type of stroke. A hemorrhagic stroke happens when a blood vessel bursts in the brain. This type of stroke may affect large arteries in the brain or small blood vessels deep in the brain. The Hemorrhage keeps the surrounding areas of the brain from getting the oxygen they need to function. Hemorrhagic strokes are less common than ischemic strokes. A Transient Ischemic Attack (TIA) are often called “warning strokes”. TIA's produce symptoms just like a stroke. Typically TIA's last a shorter amount of time, and they don't usually cause lasting damage. However, TIA's can be a major predictor of an individual's future stroke risk.

American Stroke Association. 2018. Life After Stroke. Our Path Forward.

<https://www.stroke.org/en/life-after-stroke>



Stroke Risk Scorecard

Each box that applies to you equals 1 point. Total your score at the bottom of each column and compare with the stroke risk levels on the back.

RISK FACTOR	HIGH RISK	CAUTION	LOW RISK
Blood Pressure	<input type="checkbox"/> >140/90 or unknown	<input type="checkbox"/> 120-139/80-89	<input type="checkbox"/> <120/80
Atrial Fibrillation	<input type="checkbox"/> Irregular heartbeat	<input type="checkbox"/> I don't know	<input type="checkbox"/> Regular heartbeat
Smoking	<input type="checkbox"/> Smoker	<input type="checkbox"/> Trying to quit	<input type="checkbox"/> Nonsmoker
Cholesterol	<input type="checkbox"/> >240 or unknown	<input type="checkbox"/> 200-239	<input type="checkbox"/> <200
Diabetes	<input type="checkbox"/> Yes	<input type="checkbox"/> Borderline	<input type="checkbox"/> No
Exercise	<input type="checkbox"/> Couch potato	<input type="checkbox"/> Some exercise	<input type="checkbox"/> Regular exercise
Diet	<input type="checkbox"/> Overweight	<input type="checkbox"/> Slightly overweight	<input type="checkbox"/> Healthy weight
Stroke in Family	<input type="checkbox"/> Yes	<input type="checkbox"/> Not sure	<input type="checkbox"/> No
TOTAL SCORE	<input type="checkbox"/> High Risk	<input type="checkbox"/> Caution	<input type="checkbox"/> Low Risk



Risk Scorecard Results



High Risk ≥ 3 : Ask about stroke prevention right away.



Caution 4-6: A good start. Work on reducing risk.



Low Risk 6-8: You're doing very well at controlling stroke risk!

Ask your healthcare professional how to reduce your risk of stroke.

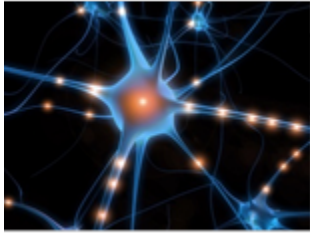
To reduce your risk:

1. Know your blood pressure.
2. Find out whether you have atrial fibrillation.
3. If you smoke, stop.
4. Find out if you have high cholesterol.
5. If diabetic, follow recommendations to control your diabetes.
6. Include exercise in your daily routine.
7. Enjoy a lower-sodium (salt), lower-fat diet.

Act **FAST** and **CALL 9-1-1 IMMEDIATELY** at any sign of a stroke:

- F** **FACE:** Ask the person to smile. Does one side of the face droop?
- A** **ARMS:** Ask the person to raise both arms. Does one arm drift downward?
- S** **SPEECH:** Ask the person to repeat a simple phrase. Is their speech slurred or strange?
- T** **TIME:** If you observe any of these signs, call **9-1-1 immediately**.

1-800-STROKES (787-6537) • www.stroke.org



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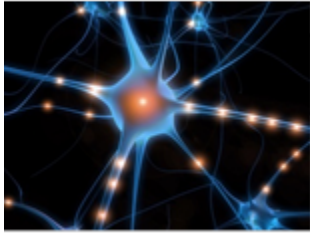
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Fall Risk Assessment

Check your risk for falling	Yes	No	Why it matters
1. Have you fallen in the past 6 months?	<input type="checkbox"/>	<input type="checkbox"/>	People who have fallen once are more likely to fall again.
2. Do you have difficulty or dizziness getting up from a chair?	<input type="checkbox"/>	<input type="checkbox"/>	This is a sign of poor balance
3. Do you have difficulty picking objects up from the floor?	<input type="checkbox"/>	<input type="checkbox"/>	This is a sign of weak leg muscles.
4. Do you take 4 or more medications?	<input type="checkbox"/>	<input type="checkbox"/>	Side effects from medication can increase risk of falling.
5. Have you noticed a decrease in hearing or vision?	<input type="checkbox"/>	<input type="checkbox"/>	Increase your risk for falling.
6. Are you worried about falling?	<input type="checkbox"/>	<input type="checkbox"/>	People who are worried about falling are more likely to fall.
7. Have you been advised to use a cane or a walker?	<input type="checkbox"/>	<input type="checkbox"/>	This is a sign of poor balance or weak leg muscles.
8. Do you steady yourself by holding onto furniture?	<input type="checkbox"/>	<input type="checkbox"/>	This is a sign of poor balance.
9. Do you often have to rush to the toilet?	<input type="checkbox"/>	<input type="checkbox"/>	Rushing to the bathroom, especially at night, increases your chance of falling.
10. Do you have a chronic medical condition or neurological problem?	<input type="checkbox"/>	<input type="checkbox"/>	Fatigue or numbness in your feet can cause increase risk for falls.

Total “Yes” answers _____

Add a point for each “yes” answer. If you scored 4 or more points, you may be at risk for falling.



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Home Safety Falls Checklist

General

- Keep a cell phone or portable phone near you at all times
- Remove clutter from pathways
- Remove scatter rugs and secure down carpets and larger area rugs
- Have adequate lighting in your home

Stairs

- Remove objects and clutter from stairs
- Secure carpeting on stairs
- Secure and install railings

Kitchen

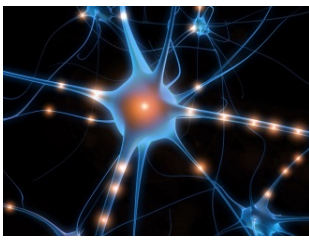
- Have everyday items used within reach
- Electrical cords off the floor
- Clean up spills on the floor

Bathroom

- Do you have an appropriate toilet seat height and grab bars around the toilet
- Do you have grab bars in your shower
- Are everyday used items within reach

Bedroom

- Clear pathway to bedside
- Nightlights to access bathroom
- Bedside table for a nightlight and phone



Post Stroke Rehabilitation

Rehabilitative therapy begins in the acute-care hospital after your overall condition has been stabilized, often within 24 to 48 hours after the stroke.

At the time of discharge from the hospital, you and your caregiver will work with hospital discharge planners to determine the most suitable level of rehab. Your recovery may include rehab in one or more of the following settings:

Acute Inpatient Rehabilitation

Provides:

- Medical care from a doctor that will take care of your medical needs: you will see them almost every day during the week
- Nurses who are specialists in caring for your nursing and rehabilitation needs
- A team of therapists including physical therapists, occupational therapists, speech therapists, recreational therapists, psychologists and brace and wheelchair specialists working together to meet all of your needs
- Therapy at least 3 hours per day, 5-7 days per week

Skilled Nursing Facility/Inpatient:

Provides:

- About an hour and a half of therapy a day; 5-7 days per week
- A slower paced, longer term rehab program
- A team of therapists including Physical therapists, Occupational therapists and Speech therapist
- A physician that will see you once a week

Outpatient

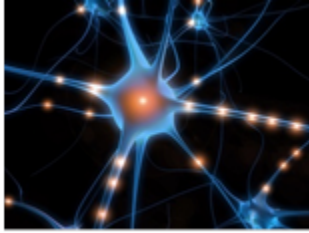
Provides:

- Individuals with several hours, often 2-3 days each week, at the facility taking part in coordinated therapy sessions
- Physical therapy, Occupational therapy and Speech therapy to address your remaining functional limitations

Home Health Care

Provides:

- Participation in an intensive level of therapy several hours per week or follows a less demanding regimen
- Nursing, Physical therapy, Occupational therapy, Speech therapy, social workers and aides to assist with your personal care
- The advantage of practicing skills and developing strategies in your own living environment



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Links to Useful Information and Resources

[Brain Injury Association of New Hampshire](#)

The Brain Injury Association of New Hampshire is the only state-wide organization in New Hampshire dedicated to brain injury and stroke support, prevention, education, and advocacy for survivors and caregivers.

<http://www.bianh.org/>

1-900-773-8400

<https://www.facebook.com/BIANH>

[ServiceLink Aging and Disability Resource Center](#)

ServiceLink provides information so that you can access and make connections to resources you need to make informed choices and live independently in your community.

<http://www.nh.gov/servicelink>

1-866-634-9412

[2-1-1 New Hampshire Community Resources](#)

New Hampshire citizens now have one, easy to remember phone number to call to access all the health and human services available to them. As of June 11, 2008, callers anywhere in the state who dial 2-1-1 are connected, at no charge, to a trained information and referral specialist who can provide them with the information they need to get help.

<http://www.211nh.org/about-us/?aboutus>

Phone: Dial 2-1-1 or 866-444-4211

TTY Number: 603-634-3388

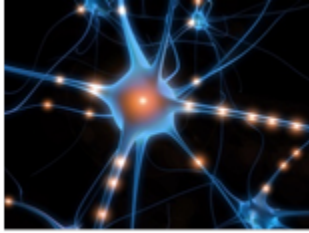
[American Stroke Association \(ASA\)](#)

Our mission is to build healthier lives, free of cardiovascular diseases and stroke. That single purpose drives all we do. The need for our work is beyond question.

<http://www.strokeassociation.org>

1-888-4 STROKE

<https://www.facebook.com/AmericanStroke>



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Links to Useful Information and Resources Continued

[American Stroke Foundation \(ASF\)](#)

To empower stroke survivors and their families to overcome ongoing challenges of life after stroke and rejuvenate their lives.

<http://www.americanstroke.org/>

1-913-649-1776

<https://www.facebook.com/asf97>

[The Brain Attack Coalition \(BAC\)](#)

The Brain Attack Coalition is a group of professional, voluntary, and governmental entities dedicated to reducing the occurrence, disabilities, and death associated with stroke. The goal of the Coalition is to strengthen and promote the relationships among its member organizations in order to help people who have had a stroke or are at risk for a stroke.

<https://www.brainattackcoalition.org>

301-496-5751

[The Brain Injury Association of America](#)

The mission of the Brain Injury Association of America (BIAA) is to advance brain injury prevention, research, treatment and education and to improve the quality of life for all people affected by brain injury. We are dedicated to increasing access to quality health care and raising awareness and understanding of brain injury. With a network of state affiliates, local chapters and support groups, we are the voice of brain injury.

www.biausa.org

703-761-0750

<https://www.facebook.com/BrainInjuryAssociationofAmerica>



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Links to Useful Information and Resources Continued

[Centers for Disease Control and Prevention \(CDC\), Division for Heart Disease and Stroke Prevention](#)

CDC's Division for Heart Disease and Stroke Prevention works to improve cardiovascular health through public health strategies and policies that promote healthy lifestyles and behaviors, health environments and communities, and access to early and affordable detection and treatment.

<http://www.cdc.gov/dhdsp/>

1-800-CDC-INFO

[The Hazel K. Goddess Fund for Stroke Research in Women](#)

The Goddess Fund was created with one clear and compelling goal: to eliminate the impact of stroke in women's lives, the lives of their families, and society at large.

<http://www.thegoddessfund.org/>

561-623-0504

[The Internet Stroke Center](#)

The Internet Stroke Center's mission is to advance understanding of stroke research and clinical care. Our goal is to provide current, professional, unbiased information about stroke.

<http://www.strokecenter.org/>

214-648-3111

[National Institutes of Neurological Disorders and Stroke \(NINDS\) Stroke Information Page](#)

The mission of the National Institute of Neurological Disorders and Stroke is to reduce the burden of neurological disease—a burden borne by every age group, by every segment of society, by people all over the world.

<https://www.ninds.nih.gov/Disorders/All-Disorders/Stroke-Information-Page>

800-352-9424



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Links to Useful Information and Resources Continued

[National Stroke Association \(NSA\)](#)

National Stroke Association's mission is to reduce the incidence and impact of stroke by developing compelling education and programs focused on prevention, treatment, rehabilitation, and support for all impacted by stroke.

<http://www.stroke.org/>

1-800-787-6537

<https://www.facebook.com/NationalStrokeAssociation>

[Stroke Engine](#)

The Stroke Engine website is sponsored by the Canadian Partnership for Stroke Recovery. Here you can find information if you just had a stroke, are starting rehabilitation, leaving the hospital, or living with a stroke.

<http://www.strokeengine.ca/>

[The Stroke Network](#)

An on-line stroke support network of stroke information. Message board and chat on-line for stroke survivor and stroke caregiver support.

<http://www.strokenetwork.net/>

[Support Group Finder - American Stroke Association](#)

Locate community support groups in your area.

<https://www.strokeassociation.org/en/stroke-support-group-finder>

1-888-4-STROKE

[Krepels Center](#)

A nonprofit organization that offers programs that engage members in meaningful and productive experiences and provide ongoing support and resources to survivors and their families.

<https://www.krepelscenter.org/>

603-570-2026 extension 2

POST-STROKE CHECKLIST (PSC): For Survivors and Caregivers



Many stroke survivors live with problems that could be treated but aren't, because they never tell their doctor about those problems. Fill out this checklist and use it to talk with your doctor about problems you might be having. Read each item and circle the most correct answer.

1. RECURRENT STROKE PREVENTION Since your stroke, have you made lifestyle changes to prevent another stroke?	Do you monitor your blood pressure? Never 1-2 x/Month 1-2 x/Week Always (at least daily)
	Do you take medication(s) as prescribed Never 1-2 x/Month 1-2 x/Week Always
	If overweight, have you lost weight? No Yes N/A
	Do you exercise regularly? Never 1-2 x/Month 1-2 x/Week Always (at least daily)
	Have you stopped smoking? No Yes N/A
2. ACTIVITIES OF DAILY LIVING Since your stroke, is it harder to:	Dress? Always 1-2 x/Week 1-2 x/Month Never
	Bathe? Always 1-2 x/Week 1-2 x/Month Never
	Eat or prepare meals? Always 1-2 x/Week 1-2 x/Month Never
	Go outside? Always 1-2 x/Week 1-2 x/Month Never
3. MOBILITY AND MOVEMENT Since your stroke, is it harder to:	Walk? Always 1-2 x/Week 1-2 x/Month Never
	Move between bed and chair? Always 1-2 x/Week 1-2 x/Month Never
	Do you fall more easily? Always 1-2 x/Week 1-2 x/Month Never
	Get in and out of a car? Always 1-2 x/Week 1-2 x/Month Never
	Balance? Always 1-2 x/Week 1-2 x/Month Never
4. SPASTICITY OR TIGHTNESS Since your stroke, do you have more stiffness in your:	Arms? Always 1-2 x/Week 1-2 x/Month Never
	Hands? Always 1-2 x/Week 1-2 x/Month Never
	Legs? Always 1-2 x/Week 1-2 x/Month Never

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5. PAIN Since your stroke:	Do you have any new pain? Always 1-2 x/Week 1-2 x/Month Never
	Do you have pain more often? Always 1-2 x/Week 1-2 x/Month Never
	Is your pain more severe? Always 1-2 x/Week 1-2 x/Month Never
6. INCONTINENCE Since your stroke, are you having trouble controlling your:	Bowels? Always 1-2 x/Week 1-2 x/Month Never
	Bladder? Always 1-2 x/Week 1-2 x/Month Never
7. COMMUNICATION Since your stroke, are you having trouble:	Communicating with others? Always 1-2 x/Week 1-2 x/Month Never
	Speaking? Always 1-2 x/Week 1-2 x/Month Never
	Reading? Always 1-2 x/Week 1-2 x/Month Never
	Using numbers? Always 1-2 x/Week 1-2 x/Month Never
8. MOOD Since your stroke, are you feeling:	Anxious? Always 1-2 x/Week 1-2 x/Month Never
	Moody or having mismatched and/or unstable emotions? Always 1-2 x/Week 1-2 x/Month Never
	Depressed? Always 1-2 x/Week 1-2 x/Month Never
	Like a different person? Has your behavior changed? Always 1-2 x/Week 1-2 x/Month Never
9. COGNITION Since your stroke, is it harder to:	Think? Always 1-2 x/Week 1-2 x/Month Never
	Concentrate? Always 1-2 x/Week 1-2 x/Month Never
	Remember things? Always 1-2 x/Week 1-2 x/Month Never
10. LIFE AFTER STROKE Since your stroke, is it harder to:	Work? Always 1-2 x/Week 1-2 x/Month Never
	Participate in social and leisure activities or hobbies? Always 1-2 x/Week 1-2 x/Month Never
11. SEXUALITY Since your stroke, are you unhappy with:	Your sexual and intimate relationship? Always 1-2 x/Week 1-2 x/Month Never
	Your sexual functioning? Always 1-2 x/Week 1-2 x/Month Never
12. RELATIONSHIP WITH FAMILY	Have your relationships with your family or friends become more difficult or stressed since your stroke? Always 1-2 x/Week 1-2 x/Month Never

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