

**CLINICAL PATHWAY  
MINIMAL IMPACT STROKE**

**Inclusion Criteria:**

- Mild cognitive, motor, sensory or communication deficits
- Requires Hospitalization for observation/assessments
- Does not require inpatient Rehabilitation
- Mild or minimal psychosocial difficulties

Expected LOS: less than or equal to 3 days from initiation of category pathway

**Clinical Pathways are not considered a substitute for professional judgement**

| EVALUATION/DISCHARGE PHASE                             |  |   |
|--|--|---|
| Phase:   | Date Initiated: ___/___/___  |   |
| <b>PATIENT OUTCOMES</b>                                | Preventative care Initiated: _____<br>Return to a functional level of Independence: _____<br>Return to pre-hospitalization environment safely with supports in place: _____<br><br>All Outcomes met.<br>Date: ___/___/___<br>Signature: _____  | <b>INTERVENTIONS</b><br><br><b>a) Assessments</b> Appropriate Stroke Team assessments completed and available on chart or on-line. Vital signs BID Identify Complementary therapies in use prior to hospitalization. (See Policy Complementary therapies) |
|  |  | <b>b) Consults</b> Regional TIA/stroke prevention clinic. Nurse Clinician for teaching As required: Neurological Consult Geriatric Consult Stroke Team If consult unable to occur within 3 days arrange priority outpt follow-up                          |
| <b>TEACHING</b>  | Patient and Family provided with information on:<br>Risk Factors for Stroke: _____<br>Stroke Prevention: _____<br>Follow-up: _____<br>Therapies: _____   | <b>c) Tests</b> Additional Dx tests as ordered Completed investigative tests available (as per Stroke Emergency/Acute Clinical Pathway)   |
|  |  | <b>d) Treatments</b> Stroke team therapies ongoing  |
|  |  | <b>e) Medications</b> ASA 325 mg po daily or Clopidogrel 75 mg po daily Patient specific medications re-evaluated and specific orders written   |
| <b>DISCHARGE PLANNING CRITERIA</b>                     | Arrangements made for medical and/or neurological follow-up.<br>Discharge plan with required resources in place as needed<br>- MRP<br>- CCAC<br>- Outpatient Services<br>- Rehab Day Hospital<br>- Neuropsychology<br>- Heart and Stroke<br><br><b>Clinical Indicator #1: Actual LOS: _____</b><br><b>If Greater than 3 days,</b><br><b>Rationale: _____</b> | <b>f) Nutrition</b> As appropriate (determined by stroke risk factors)  |
|  |  | <b>g) Activity/Safety</b> AAT - with safety measures taught   |
|  |  | <b>h) Elimination</b> Bowel/Bladder monitoring and training as needed   |
| <b>Pathway Reviewed with Patient/Family (initial):</b> | _____ Yes      _____ No  | _____ Yes      _____ No   |
| <b>Signatures:</b>                                     | _____<br>_____   | _____<br>_____  |
|  | _____<br>_____   | _____<br>_____  |

60503 D HR (Sept/2002)

