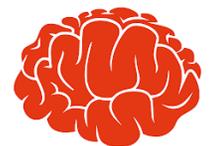


Acute Stroke Information



VGH Neurosciences
Neurosciences T5/6
Jim Pattison Pavillion

T5A: 604-875-4281
T5B: 604-875-4188
T6A: 604-875-5530
T6B: 604875-5279

Neurosciences Wards

Neuro ICU T5A

- Must call to enter unit (phone located outside doors)
- No more than 2 visitors at one time
- Patient/Nurse Ratio:
1 Registered Nurse (RN) to 2 patients
- Cardiac monitoring
- Visiting hours 8:00 am–6:00 pm and 8:00 pm–10:00 pm

Step-down Unit (T5A)

- Must call to enter unit (phone located outside doors)
- No more than 2 visitors at one time
- Patient/Nurse Ratio:
1 RN to 2 to 3 patients
- Patients no longer require cardiac monitoring
- Visiting hours 8:00 am–6:00 pm and 8:00 pm–10:00 pm

T5B, T6A, T6B

- Inpatient Neurosciences Units
- Patient/Nurse Ratio:
1 RN to 4 to 6 patients
- Visiting Hours until 10:00 pm

Staying overnight with a family member is highly discouraged, and will be considered only on a case by case basis.

VGH is a scent free zone. Refrain from wearing perfume, cologne or aftershave or bringing flowers with strong scents. Some people are highly allergic to fragrance ingredients, and can suffer severe reactions.

Discharges

Repatriation:

- For patients who do not live in Vancouver.
- Once the patient is medically stable and is no longer requiring acute stroke care they will be transferred to a hospital that is closer to their home address.

Transfers:

- For patients who came to VGH from another hospital.
- Patients will be transferred back to the originating hospital when medically stable.

Rehab:

- Patients may be assessed to participate in a rehab program near their home.
- Depending on individual patient needs, an inpatient rehab facility may be a discharge destination.

Home:

- Patients will be discharged to their home when they are considered safe to do so.

For more copies, go online at <http://vch.eduhealth.ca> or email pheh@vch.ca and quote Catalogue No. **FM.340.N398**

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The information in this document is intended solely for the person to whom it was given by the health care team.
www.vch.ca

What To Expect In...

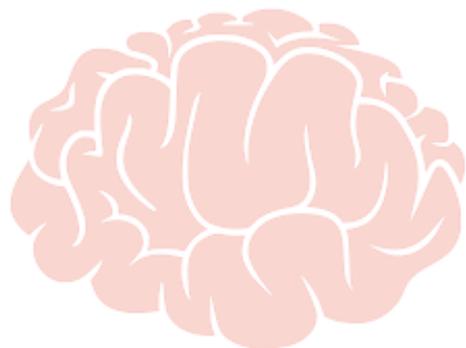
The First 12 Hours

Assessments and Tests

Doctors (several different doctors may be involved) and Nurses (ER nurses, stroke nurses) will be performing a variety of assessments on the patient looking for any subtle changes in neurological status.

Some of the tests the patient might receive are:

- CT scan to look for any changes in the brain
- CTA to look for changes in the blood vessels
- MRI may be ordered if the CT scan is inconclusive.
- Multiple blood tests
- ECG to check for abnormal heart rhythms



Possible Interventions

Depending on the type of stroke the patient has had the doctors may present different treatment options.

If the patient has had a stroke where blood flow is cut off to a part of the brain (ischemic stroke), the patient may receive a strong clot busting drug called tPA. Because tPA is such a strong blood thinner, not everyone will be eligible to receive it, (there is a list of criteria the Doctors must consult before giving tPA to patients). Sometimes a patient may have a procedure done in which a Doctor attempts to remove the clot from the blood vessel. This is called a thrombectomy. Sometimes a patient will receive tPA and also have a thrombectomy.

If the patient has had bleed in the brain (hemorrhagic stroke), they will not receive tPA or a thrombectomy. However, they may need close blood pressure control along with cardiac monitoring.

There is always the possibility, in either an ischemic or a hemorrhagic stroke, that there will be no intervention. The risks and benefits to any intervention are always evaluated on a patient to patient basis.

The Next 48 Hours

Monitoring

- Patients may require monitoring in the NeuroICU (NICU). This consists of cardiac monitoring, and frequent nursing assessments.
- Patients who are requiring intravenous (IV) blood pressure medication will be monitored in the NICU.
- Patients who receive tPA or a thrombectomy will also be monitored in the NICU before they are transferred to a non-monitored ward.

Follow-up Tests

- Blood Tests
- CTA
- CT
- MRI

Allied Health

The patient and family can expect to see one or more of the following professionals from our interdisciplinary allied health team:

- Occupational Therapists
- Physiotherapists
- Speech and Language Pathologists
- Care Management Leaders
- Social Workers
- Pharmacists
- Patient Care Coordinators

A detailed description of these professionals is available in the “Your Stroke Journey” guide, which will be available to you when you get to the inpatient stroke unit.