

Class Preparation Ischemic Stroke

Directions: Read the scenario and complete the table below

Scenario: A 70-year-old patient diagnosed with an Ischemic Stroke was admitted 1 day ago. His medical history includes hypertension, osteoarthritis, and type 2 diabetes mellitus. He has right-sided paralysis, garbled speech, and a weak cough reflex. This morning, he is very restless. Vital signs: Blood pressure 160/80, pulse 110, respirations 24. Oxygen saturation is 90%.

Use an X to indicate which actions listed in the left column would be implemented to prevent complications in this patient. Write the rationale for each action (why or why not would this be implemented?).

Actions	Implemented	Rationale
Administer subcutaneous heparin.	X	Ischemic stroke not hemorrhagic so if he is bed bound in a hospital, this would be prophylaxis to prevent another blood clot
Implement seizure precautions.		Non-essential at this time, no history of seizures
Apply oxygen via cannula at 2 L/min.	X	Apply supplemental o2 due to the increased RR, and decreased o2%
Consult speech therapy.	X	Garbled speech, he is aspiration risk, possible deficits with swallowing
Position the patient on his right side for no longer than 2 hours.		We would not place the client on the effected side, would reposition to the other side
Perform passive ROM exercises.	X	This will assist to prevent posturing and rigidity of extremities if client cannot do so actively.
Elevate head of bed 45 degrees.	X	This will assist with breathing (low o2, increased RR, weak cough reflex) expand the lungs vs. lying supine.

		Aspiration risk
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