

# Stroke Alert Education and Jump Bag

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## Introduction

- Stroke events in the post-operative period are low volume, high-risk events that require timely identification and treatment.
- This project aimed to improve the response to potential strokes in the Post Anesthesia Care Unit (PACU) by enhancing nurse knowledge and confidence with stroke alert protocols and documentation compliance.

## Purpose

- Upon review of stroke events in PACU and nurse identified barriers to stroke alert response in PACU two areas of focus were identified.
- The primary focus was to increase nurse's confidence and knowledge with the stroke alert interventions and process.
- The secondary focus was to increase adherence to documentation standards per the regulatory requirements with the direction of the stroke coordinator.
- Education was developed to pair with the implementation of stroke jump bag to address documentation fall outs.

## Methods

- This project had two main components: targeted education and stroke jump bag implementation.
- In collaboration with the stroke coordinator and unit stroke champion, nursing education focused on the stroke alert processes and interventions, with an emphasis on required documentation.
- Education sessions were delivered to all members of the nursing team during daily huddles and one-on-one sessions.
- The jump bag was introduced during these sessions and the essential supplies and tools in the bag were reviewed for quick intervention when initiating a stroke alert.

## Methods (continued)

- Nurse confidence and knowledge was assessed through pre- and post- education surveys.
- Stroke alert documentation compliance was measured before and after intervention by reviewing events from the baseline period and for a year following implementation.

## Results

- Nurses were surveyed following the intervention to assess for confidence and knowledge.
- Nurse confidence level with implementing stroke alert interventions increased by 10%.
- Nurse knowledge with activating a stroke alert increased 11% and knowledge with the stroke alert process increased 16% (figure 3).
- Nurse knowledge of required stroke alert documentation increased by 31% (figure 3).
- Documentation compliance increased from a baseline of 66% to 75% post education and stroke bag implementation.

Stroke Alert Quick Reference	
<b>Call Emergency Line: 61-6911 to initiate Stroke Alert</b>	
<b>Tasks:</b>	<b>Documentation &amp; Assessments:</b>
<ul style="list-style-type: none"> <li>POC Glucose</li> <li>Labs (in order of draw): aPTT/INR, CMP, CBC (blue, green, lavender)</li> </ul>	<ul style="list-style-type: none"> <li>Initial NIH (to be done by Stroke Alert team)</li> <li>GCS</li> <li>Q15 min VS &amp; Neuro Exam                             <ul style="list-style-type: none"> <li>Pupils and neuromuscular exam broken into all four extremities until treatment decision is made</li> </ul> </li> <li>Dysphagia Screen</li> </ul>
<b>Additional Information:</b>	
<ul style="list-style-type: none"> <li>Stroke Alert response team to perform neuro exam prior to the patient being transported anywhere</li> <li>Stroke Order Set: "ED IP Stroke Alert Diagnostic" – ensure order placed under IM physician (not anesthesiologist) for results</li> <li>Labs can be tubed to lab via green bag and STAT status.</li> <li>Primary RN to accompany pt to STAT CT – record VS from portable monitor</li> <li>Additional labs may be ordered, must be ordered and collected <u>after</u> stroke alert order set labs</li> </ul>	

Figure 1. Stroke alert reference guide provided to nurses during education sessions and available in the stroke jump bag.

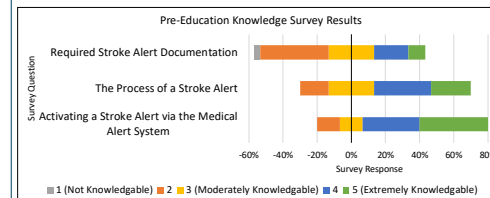
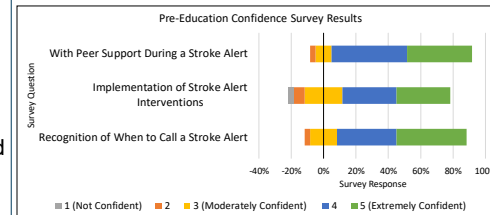


Figure 2. Pre-Education Survey Results.

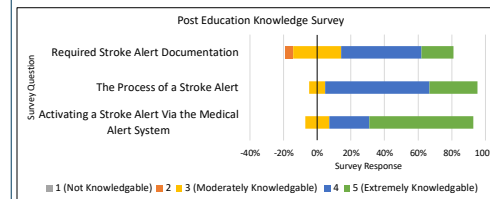
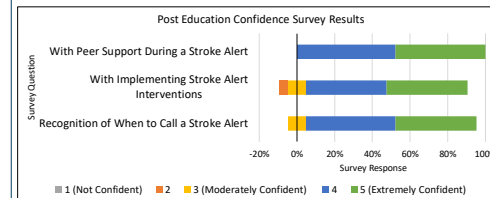


Figure 3. Post Education Survey Results.

## Conclusions

- These post-education improvements suggest that targeted education, combined with the implementation of the stroke alert jump bag enhanced nurse confidence and knowledge with the stroke alert process ultimately improving documentation compliance with stroke events.
- Project limitations include low volume size for stroke alert documentation when comparing pre- and post- education.
- Nurses reported a better understanding of the stroke alert process and what to expect in the PACU setting.

## Implications for Practice

- The implementation of stroke alert grab bags could be applicable in other ambulatory areas within the hospital.
- Stroke alert events will continue to be reviewed to assess for other areas of opportunity surrounding stroke alerts in the PACU.
- Stroke specific education will continue to occur annually, and new hires will receive education regarding the stroke alert jump bag.

## Acknowledgements

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