

My Stroke Passport

Information for patients



This passport has been designed to help you understand your stroke. We hope you will add information throughout your stroke journey and your healthcare team can help you with this.

It will be useful to share this passport with your family and the healthcare professionals caring for you, as this will help them to understand your stroke. It will contain useful information from your first admission to hospital through to your discharge home and on-going stroke journey.

We recommend you take this passport with you to all your appointments including hospital, GP, and aftercare sessions.

If you need to speak to anyone about any aspect of your care at any point, please speak to a member of staff.



About me

Name: _____

Date of birth: _____

Address: _____

Phone number: _____

NHS number: _____

Hospital number: _____

Admitting hospital: _____

GP name: _____

GP practice and address: _____

GP phone number: _____

Emergency first contact: _____

Relationship: _____ **Phone:** _____

Address: _____

Emergency second contact: _____

Relationship: _____ **Phone:** _____

Address: _____

Social background

This page can be filled in at your first occupational therapy assessment

I live: _____

Any dependents (children, elderly parents, pets): _____

Type of residence (house, bungalow, care home): _____

Do you have any carers at home? If so, how many times a day do they visit you?

Care provider name: _____ Phone : _____

Do you have any equipment in place at home (grab rails, lifeline, commode, hoist)?

Do you have help with shopping? Yes / No / Needed (please circle)

Do you need help with household tasks? Yes / No / Needed (please circle)

What hobbies do you have? _____

Do you drive a car or other type of vehicle (including a bicycle)? _____

You cannot drive for at least 30 days following your stroke. Ask for advice from your GP before you drive again, as your ability to drive safely may have been affected by your stroke. If your symptoms have not improved after 30 days, you may be advised to have a driving assessment. You need to tell your insurance company that you have had a stroke, in some cases you will need to tell the DVLA as well.

Do you work? Yes / No (please circle) If so, where and how many hours?

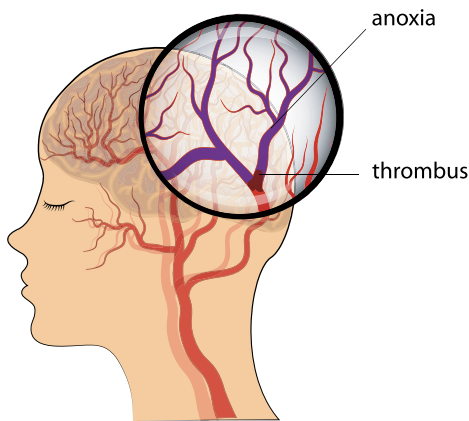
It is important to take the time to recover from your stroke. Speaking to your employer and keeping them updated with your progress may help them to understand what has happened to you. If you need any help or support with this, please speak to your health professionals.

My diagnosis

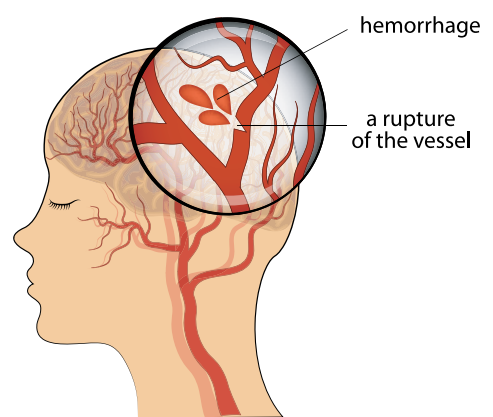
The hospital team will help you fill this section in

Symptoms I was admitted to hospital with

What type of stroke did I have?



ISCHEMIC STROKE



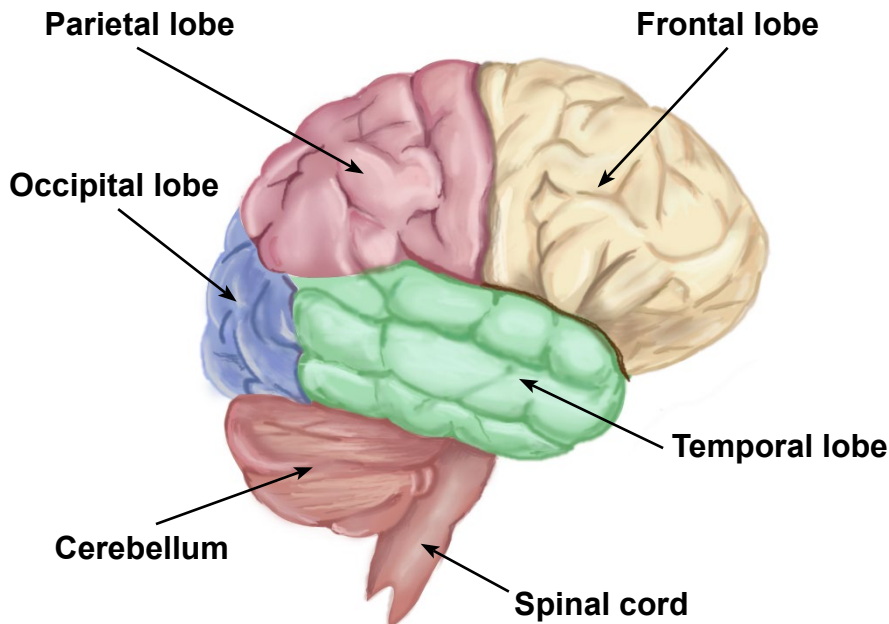
HEMORRHAGIC STROKE

When did it happen?

Why did I have a stroke?

Medical background (past medical history, with dates if possible)

My diagnosis



Frontal lobe: planning, problem solving, self-control, and reasoning.

Parietal lobe: sense of touch, taste, and temperature. Understanding space and distance. Difficulty with spelling and numbers.

Occipital lobe: interpreting what you see. Processing visual information, such as colours and shapes.

Cerebellum: problems co-ordinating movement. Issues with balance. Difficulties with dexterity and speed of movement.

Temporal lobe: short- and long-term memory related to speech, recognising faces and music. Behaviour, hearing, and emotions.

The right and left side of your brain perform different functions.

Each side of your brain is linked to the opposite side of your body. Damage to the left side of your brain will mainly cause symptoms down the right side of your body and vice versa.

The left side of your brain is mainly involved in language and the right side of your brain is involved in emotions and spatial orientation.

Everyone's brain is unique to them, developed through experiences and interactions with each other over a number of years.

What has changed since my stroke?

This section should be completed during your stay in hospital, together with a member of the therapy team.

Mobility (are you able to stand / walk? do you use an aid (for example a Zimmer frame, stick, or hoist?))

Tone (are your muscles stiff or do they feel heavy?)

Sensation (any numbness, tingling, extra sensitive, or pain?)

Cognition (any short-term or long-term memory problems? having difficulty planning and organising tasks?)

Communication (can you talk clearly or do you use other ways to communicate?)

Swallow (can you eat any food or do you need a softer texture?)

Vision (are you able to see as you did before?)

Continence (any increased urgency with needing the toilet or problems opening your bowels?)

Fatigue? (does it take more effort to do tasks?)

Emotional? (are you finding that you are more tearful, feeling low in mood, or struggling to motivate yourself?)

Other (is there anything else that has changed since your stroke?)

What can I do to reduce my risk of further strokes?

If you have had a TIA/stroke, the risk of you having further strokes increases but there are some actions you can take to help reduce these risks.

There are some risk factors that you may not be able to control (such as your ethnicity or age), however it is important to follow the advice below.

- **Take your medications as prescribed**

It is important to take the medication prescribed by your doctors. You may have been started on new medication to help prevent further strokes.

If you have any questions or are having any unwanted side effects, please speak to your stroke team while in hospital. Once discharged speak to your community pharmacist or GP before you consider making any changes to your medication and for repeat prescriptions.

- **Have regular health check-ups**

We advise you to have regular check-ups with your GP or community pharmacist. These are important to help monitor existing conditions and advise on new conditions. For example:

- **Blood pressure** can be monitored at some pharmacies, GP surgeries, or you can buy a blood pressure machine so that you can monitor this yourself.

- **Cholesterol** can be checked in some pharmacies or at your GP surgery.

- Your GP may do tests if they feel you are at risk or showing signs of developing **diabetes**. If already diagnosed, your community team can help you to monitor this.

- Following your stroke your consultant may refer you to the Cardiology Department to have a heart monitor to detect if you have **atrial fibrillation (AF)**. If already diagnosed, your GP should monitor your condition and the medication you are prescribed for this.

- **Lifestyle changes**

There are many things you can do to help lower your risk of further strokes such as:

- Stop smoking

Web: www.nhs.uk/livewell/smoking

Web: www.ekhuft.nhs.uk/stop-smoking-service/

- Reduce how much alcohol you drink

Web: www.drinkaware.co.uk

- Eat a healthy balance diet

Web: www.nhs.uk/live-well/eat-well

- Regular exercise (as you are able and at the consent of your GP).

Looking forward (short-term goals)

These goals are part of your transition into life after stroke. They can be set at any point and be anything you would like to achieve. This will help your health team to set your individual goals.

Things I would like to achieve and how I think I will achieve these.

1.

3.

Date:

Date:

2.

4.

Date:

Date:

Short-term goals set in hospital (your hospital team will help you to set these goals and plan how you will achieve them).

1.

4.

**Set with:
Date:**

**Set with:
Date:**

2.

5.

**Set with:
Date:**

**Set with:
Date:**

3.

6.

**Set with:
Date:**

**Set with:
Date:**

Looking forward (long-term goals)

Once you have left hospital, your community team will help you to revisit your short-term goals and plan longer-term goals with you.

1.

Set with:
Date:

6.

Set with:
Date:

2.

Set with:
Date:

7.

Set with:
Date:

3.

Set with:
Date:

8.

Set with:
Date:

4.

Set with:
Date:

9.

Set with:
Date:

5.

Set with:
Date:

10.

Set with:
Date:

My medications

When discharged from hospital you will be given your discharge summary. This will contain information about your current medications, including how the medication should be taken.

Your discharge summary will also be sent electronically to your GP and any other relevant specialists. **It is important to keep your copy of the summary with this Stroke Passport so you can refer back to it.** Please contact your GP when you need a repeat prescription.

Following your stroke, your medical team may have changed your medications in order to prevent a further stroke. Your new medication may include one or more of the following.

- **Antihypertensive**

This type of medication is used to help lower blood pressure. Increased blood pressure can increase your risk of developing other health problems. You may be prescribed just one or a combination of different types of antihypertensive medication. Your team will advise you on your target blood pressure.

- **Statin**

These are the main type of drug used to help lower your cholesterol, as part of a healthy diet and lifestyle. Some patients may have side effects from statins, but most do not. These drugs are key in the prevention of further strokes.

- **Antiplatelet**

Antiplatelets (such as Aspirin and Clopidogrel) are used to thin the blood and make it less sticky, which prevents clots from forming. These need careful monitoring by your doctor. It is important that you read the patient information leaflet that comes with the medication, so you are aware of any possible side effects.

- **Anticoagulant**

These medications are used to slow down the clotting time of your blood. They are most commonly used to treat Atrial Fibrillation (AF) which is the most common cause of stroke.

These medications include Warfarin or the new oral anticoagulants (Apixaban, Dabigatran, Rivaroxaban, and Edoxaban). These all work in slightly different ways. Your consultant will discuss and help you to decide which one best suits you.

With any medications that thin the blood there will be side effects and you should monitor for signs of bleeding. It is important that you read the advice leaflets that come with the medications.

It is important to take your anticoagulants at the same time every day. This is a general guide only and all medications should be taken as directed. If you have any problems, contact your GP or community pharmacist.

Support in the community

- **NHS community nurses and the Early Supported Discharge Team**

The stroke specialist nurse's role is to support you following discharge from hospital. They will:

- look at your medications
- follow-up investigations
- link into rehabilitation services via the Intermediate Care Team
- provide access to Stroke Association services and local support groups, other health services, and social services.

You will be known to the stroke specialist nurse and will have the opportunity to be reviewed on discharge, at six months, and yearly.

- **Stroke Association**

"We believe in life after stroke. That's why we support stroke survivors to make the best recovery they can. It's why we campaign for better stroke care. And it's why we fund research to develop new treatments and ways of preventing stroke".

Stroke helpline: 0303 30 33 100

Web: www.stroke.org.uk

- **Headway East Kent**

Headway East Kent was established in 1989 to serve the interest of adults with acquired brain injury living in the Canterbury and Thanet areas of Kent. Headway East Kent has since developed and grown, and now provides a service in all areas of East Kent providing Day Care Centres and Carer Support Services throughout the East Kent area: Canterbury, Ramsgate, Ashford, Dover, and Folkestone. Headway East Kent is a registered charity and company limited by guarantee.

Headway UK produces a wide range of publications and fact sheets on the various issues concerned with acquired brain injury.

Free confidential helpline: 0808 800 22 44

Web: www.headway.org.uk

If you need information about Headway East Kent and local services contact the Headway Assessment Officer on 01227 78 30 02.

- **Different Strokes**

Supports younger stroke survivors of working age.

Telephone: 0345 1 30 71 72

Web: www.differentstrokes.co.uk

Appointments

Date	Time	Appointment with	Where?

Questions to ask

Use this space to write down any questions you think of, so that when you are at your hospital appointment you can ask.

This passport has been adapted from the My Stroke Passport (2019) produced by Louise Stere and Shannon Obi, Stroke Liaison Nurses at East Kent Hospitals.

This leaflet has been produced with and for patients

If you would like this information in **another language, audio, Braille, Easy Read, or large print** please ask a member of staff. You can ask someone to contact us on your behalf.

Any complaints, comments, concerns, or compliments please speak to your doctor or nurse, or contact the Patient Advice and Liaison Service (PALS) on 01227 78 31 45, or email ekh-tr.pals@nhs.net

Patients should not bring in large sums of money or valuables into hospital. Please note that East Kent Hospitals accepts no responsibility for the loss or damage to personal property, unless the property had been handed in to Trust staff for safe-keeping.

Further patient leaflets are available via the East Kent Hospitals web site www.ekhuft.nhs.uk/patientinformation