Triage Scale (ATS) Category 1 or 2 (seen within 10 mins) Treatment tPA (tissue-type plasminogin activator) All patients to be assessed for tPA eligibility All eligible patients to receive tPA Fewer All patients to have their temperature taken on admission to Emergency Department (ED) and then at

All patients presenting with signs and symptoms of suspected stroke should be triaged to Australasia

least four hourly whilst they remain in ED Treat temperature 37.5°C or greater with paracetemol within one hour

Sugar Formal venous (laboratory) Blood Glucose Level (BGL) on admission to ED Record finger prick BGL on ED admission and monitor finger prick BGL every 6 hours (or greater if

elevated) Administer insulin to all patients with BGL > 10 mmol/L within one hour . Swallow Patients remain Nil By Mouth until a swallow screen by non-Speech Pathologist (SP) or swallow assessment by SP performed i.e:

 No oral food or fluids to be given prior to swallow screen by non-SP or swallow assessment by SP No oral medications administered prior to swallow screen by non-SP or swallow assessment by SP All patients who fail the screen are to be assessed by a SP

Transfer All patients with stroke to be discharged from ED within 4 hours All patients with stroke to be admitted to the hospital's stroke unit

T³ Implementation strategy Multidisciplinary Workshops Workshop 1 - Barriers and Enablers Assessment (one at each site, 60 minutes)

T³ Clinical Protocols

Triage

.

To present details of trial To identify local barriers and enablers

To identify local site clinical champion

Workshop 2 - Action Plan (one at each site, 60 minutes) To discuss Action Plan

To ascertain actions already taken

To discover any further local barriers

20 minute Powerpoint presentation and 10 minute discussion

Didactic and interactive education (minimum one at each site, 30 minutes)

 8 minute video developed by an academic ED nurse clinician / opinion leader Use of clinical opinion leaders

Key national clinical opinion leaders at Workshop 1 and available for any site-requested queries

Clinical site champions from ED and the stroke unit

Reminders

Reminder poster to display in ED and pocket sized card to attach to ID lanyard for staff Proactive direct contact every six weeks in the form of:

Site visits every three months (face-to-face) using action plan

 Teleconferences every three months with clinical champions and site coordinator using action plan Emails – reactive and monthly proactive emails

Telephone support - reactive

Emergency Department Stroke Progress Note

Julia Schneider

Emergency Department Stroke Progress Note:

Enjoying the Melody of Phrase: An Emotional Symphony within Emergency Department Stroke Progress Note

In some sort of consumed by screens and the ceaseless chatter of quick communication, the melodic elegance and psychological symphony produced by the published word usually diminish in to the back ground, eclipsed by the constant sound and interruptions that permeate our lives. Nevertheless, set within the pages of **Emergency Department Stroke Progress Note** an enchanting literary prize full of raw thoughts, lies an immersive symphony waiting to be embraced. Crafted by a masterful musician of language, this interesting masterpiece conducts visitors on a mental journey, skillfully unraveling the hidden melodies and profound influence resonating within each cautiously crafted phrase. Within the depths of the moving examination, we shall examine the book is main harmonies, analyze their enthralling publishing type, and submit ourselves to the profound resonance that echoes in the depths of readers souls.

https://staging.conocer.cide.edu/About/browse/HomePages/fragrant%20flower.pdf

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