Top Ten Things To Know
Nursing and Interdisciplinary Rehabilitation
Care of the Stroke Patient

1. In the United States, approximately 795,000 strokes occur per year, and about 6.5 million individuals over the age of 20 have had strokes.

2. The focus of stroke care has been on acute and subacute phases, and healthcare providers are often unaware of the patients’ potential for improvement in chronic recovery phases as well as common issues that stroke survivors and their caregivers experience.

3. This scientific statement summarizes the best available evidence and recommendations for interdisciplinary management of the needs of stroke survivors and their families during inpatient and outpatient rehabilitation and in chronic care and end-of-life settings.

4. The WHO’s international classification of functioning, disability, and health (ICF) describes the impact of stroke according to the following dimensions: loss of body functions and structures, activities limitations, participation restrictions and personal and environmental contextual factors.

5. Common post-stroke problems include motor deficits, communication and cognitive disorders, depression, and other major complications. Other issues that need to be addressed include secondary stroke prevention, the patient’s return to work, compliance with treatment, as well as the patient’s emotional state, coping style, and learning capabilities.

6. Stroke rehabilitation requires the skills of an interdisciplinary team where nurses play a central role in care coordination throughout the recovery continuum.

7. It is imperative to educate and support family caregivers. Family support is the most important environmental factor for stroke.

8. End-of-life and palliative care and decisions may need to be considered clinically at any point along the stroke continuum.

9. There is strong evidence that organized, interdisciplinary stroke care and rehabilitation initiated at the time of admission and sustained across the healthcare continuum significantly reduces the likelihood of death and disability within the first year.

10. This statement presents the complexities of interdisciplinary, postacute care of stroke survivors in a format that optimizes the potential for the highest achievable outcomes and quality care.