

ATYPICAL/VAGUE STROKE RECOGNITION: Expediting the Nursing Dysphagia Screen in the Emergency Department

Promoting Nursing Engagement & Empowering Excellence

Jennifer Sposito, MSN, RN & Annie Worshoufsky, MSN, RN, CEN

Evidence Based Intervention Background

- Stroke is the leading neurological cause of dysphagia (difficulty swallowing)
- 50% of stroke patients with dysphagia aspirate & 1/3 of those patients develop pneumonia that requires treatment*
- Early identification of dysphagia post stroke is a safety goal & a Joint Commission Stroke Center requirement

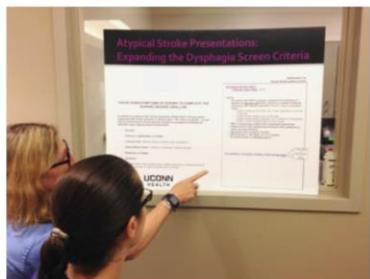
Fast Facts: UConn Health John Dempsey Hospital

- UConn Health became a Primary Stroke Center in December 2014
- Approximately 250 stroke patients yearly
- Trained stroke nurses in the Emergency Department (ED), Intensive Care, Intermediate Care & Medicine Units
- 2016 data identified that 47% of patients with missed dysphagia screen opportunities presented in the ED with atypical/vague stroke symptoms

Challenge: Increase ED nurses' recognition of atypical/vague stroke presentation & implement the stroke clinical pathway which includes an expeditious bedside dysphagia screening.

Objectives

- Describe atypical/vague stroke symptoms
- Recognize the patient with atypical/vague stroke symptoms who will require a bedside dysphagia screen
- Effectively perform a bedside dysphagia screen on stroke patients and document screening in electronic medical record



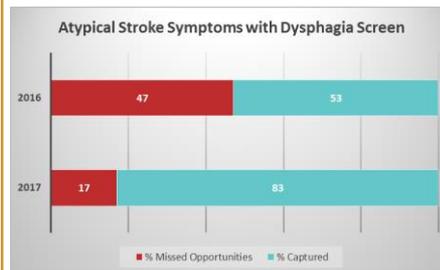
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Strategies

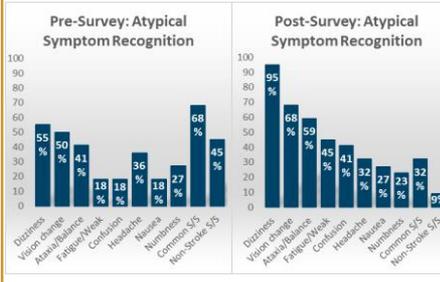
- ED nurses pre-surveyed for knowledge of atypical/vague stroke symptoms
- Educational curriculum provided including an online learning platform with case scenarios & identification tools
- Resource poster addressing knowledge gaps
- Daily stroke audits by stroke coordinator
- Staff engagement reinforced in daily huddles, monthly meetings by ED management, & through stroke champions
- Post survey to assess newly acquired atypical/vague stroke symptom knowledge

Results

In 2017, missed dysphagia screen opportunities in ED patients presenting with atypical/vague stroke symptoms reduced from 47% in 2016 to 17%



Post survey, ED nurses improved in their ability to identify atypical/vague stroke presentation



Implications for practice

Recognition of atypical/vague stroke symptoms leads to an expeditious ED bedside dysphagia screen. This increased patient safety by decreasing the potential risk of aspiration for patients who may experience dysphagia post stroke.

Signs and Symptoms of Atypical/ Vague Stroke Presentation are:



References:
*Lever, N. M., Nyström, K. V., Schindler, J. L., Halliday, J., Wira, C., & Funk, M. (2013). Missed Opportunities for Recognition of Ischemic Stroke in the Emergency Department. Journal of Emergency Nursing, 39(5), 434-439. doi:10.1016/j.jen.2012.02.011
* Donovan, N., Daniels, S., Edmiston, J., Weinhardt, J., Summers, D., & Mitchell, P. (2013). Dysphagia Screening: State of the Art. Invitational Conference Preceding From the State-of-the-Art Nursing Symposium, International Stroke Conference 2012. Stroke, 44, E24-E31.