

Children's Mercy Kansas City

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Care Process Models

Quality Improvement and Clinical Safety

2-2021

Stroke, Suspected

Children's Mercy Kansas City

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These guidelines do not establish a standard of care to be followed in every case. It is recognized that each case is different and those individuals involved in providing health care are expected to use their judgment in determining what is in the best interests of the patient based on the circumstances existing at the time. It is impossible to anticipate all possible situations that may exist and to prepare guidelines for each. Accordingly, these guidelines should guide care with the understanding that departures from them may be required at times.

Recommended Citation

Children's Mercy Kansas City, "Stroke, Suspected" (2021). *Care Process Models*. 58.
https://scholarlyexchange.childrensmercy.org/care_models/58

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Pediatric Patient with Suspected Stroke external to Children's Mercy (CM) Adele Hall (AH) campus:

- Non-CMH institutions: Call 1-800-GOMERCY
- CM Offsite locations:
 - Call Transfer Center: 1-800-GOMERCY or x51529
 - Identify you are caring for a "suspected stroke" patient
 - Transfer to CM AH campus

Stroke Screening Evaluation

I. Is there a focal neurological deficit?

- Unilateral weakness or sensory change
- Vision loss or double vision
- Speech difficulty
- Dizziness or trouble walking

II. Did the problem begin or get worse suddenly?

III. Has the problem been present for less than 5 hours? (When was the child last seen well?)

If Yes to ALL three of the questions above, patient symptoms are concerning for stroke.

Patients > 24 months presenting to Adele Hall ED with Suspected Stroke

Symptoms concerning for stroke based on **Stroke Screening Evaluation?**

No → Off guideline continue acute care management

Yes → ESI-1 or 2

Does pt. have Sickle Cell disease or a mitochondrial disorder?

Yes, mitochondrial disorder → Off guideline, page metabolic genetics

Yes, Sickle Cell → Off guideline, see [Sickle Cell Stroke CPM](#)

Contact neurology through the Transfer Center at x51529 that you have a pt with a "suspected stroke in the ED" regarding initiation of [Stroke \(Suspected\) Powerplan](#)

Process coding:

Yellow: Stroke suspected by ER

Grey: Stroke Alert Activated

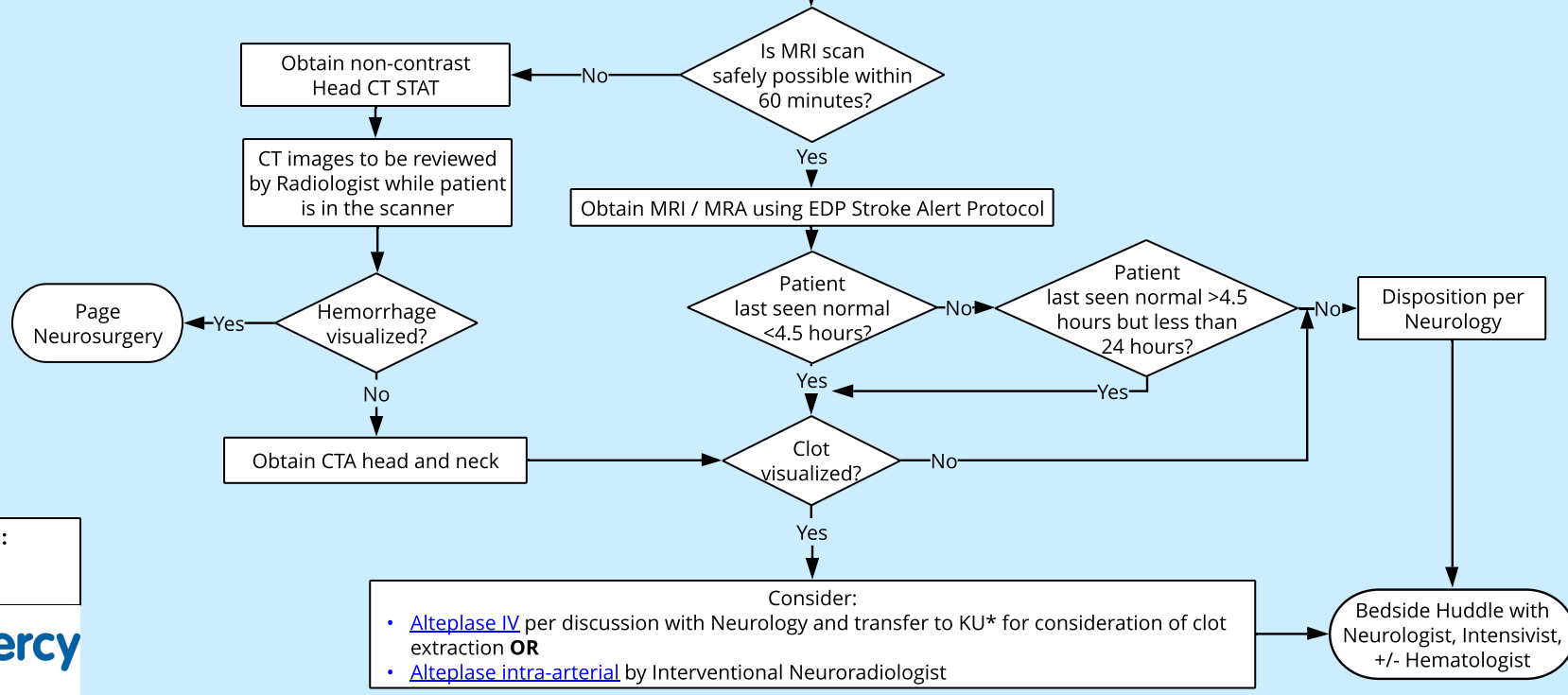
Blue: Neuroimaging Protocol enacted by Neurology

- Make patient NPO
- Place two large bore IVs, refer to Radiology Department CT Angiography Guidelines found in the powerplan
- **Obtain:** CBCD, BMP, PT, APTT, Fibrinogen, D-Dimer, ESR or CRP, Type & Screen, Urine hCG (female > 10 years) or serum beta hCG

Do not delay imaging to obtain labs or IV access

For patients with a Suspected Stroke on a Med-Surg unit at CM AH campus:

- Call Transfer Center: 1-800-GOMERCY or x51529
- Identify you are caring for a "suspected stroke" patient



Algorithm reviewed/ revised: 02.20; 6.20; 2.12.21
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