

***Booklet for Patients Who Had a Stroke***



***This booklet provides information about your hospital stay following a stroke.***

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## **About the Stroke Unit 50N**

The staff on the Stroke Unit 50N provides care to stroke patients as well as patients admitted with many other diagnoses.

Our unit has single, double or four-bedded rooms. Single rooms are used primarily for agitated and/or confused patients who need a quiet environment or patients under isolation precautions due to the presence of contagious bacteria or bacteria resistant to antibiotics. Visitors and patients should avoid going into these rooms unless they are hospitalized therein.

### **Note:**

In order to prevent stroke patients from spending prolonged stay in emergency, we offer a temporary alternative: bed 541-5. If you are admitted to room 541-5, you will be transferred to a regular hospital bed elsewhere on the unit as quickly as possible.

## *Helpful Information for Your Stay*

Visiting hours are from **2 pm** to **8:30 pm**, but caregivers and significant others may visit from 8:00 am to 8:30 pm. Except under exceptional circumstances, children under 12 years old are not permitted in the hospital.

Times for the various exams and treatments scheduled during the day are indicated by room number on a dedicated board at the nurses' station.

Bedside phones are available for all patients. You may call out at any time (dial #9 before the phone number); however, you cannot receive phone calls between 10 pm and 7 am in order to promote sleep for you and the other hospitalized patients.



You can reach the unit by calling **450-668-1010**, extension **23477**.

Generally, meals are served at **8:15 am**, **11:45 am** and **5:15 pm**.



If you wish to watch television, you must call **1-866-223-3686**. You can then rent it for as many days as you wish.



For your comfort, here are some personal items you might want to bring that are not provided by the hospital:

- ✓ Closed slippers or rubber-soled shoes
- ✓ Housecoat
- ✓ Underwear
- ✓ Toothpaste, toothbrush, and mouthwash
- ✓ Sanitary pads
- ✓ Facial tissues
- ✓ Shaving accessories
- ✓ Comb or hair brush
- ✓ Soap and shampoo
- ✓ Deodorant
- ✓ Glasses case
- ✓ Dentures, dental prostheses in a properly identified container for your use
- ✓ Hearing aids, in a properly identified container, and spare batteries
- ✓ Any clothing, outerwear and footwear adapted to the season
- ✓ House keys and a bag or suitcase to facilitate transportation of your belongings (in anticipation of discharge)



**Note:**

We strongly discourage you from bringing valuable objects with you during your hospital stay, including cash or jewelry. We recommend you to send them at home.

**The hospital is not responsible for lost or stolen items.**

## Partners in Your Care

**A**t CISSS Laval, we consider you and your loved ones to be partners in care.

You can participate in your own recovery by following a few recommendations:

- Wash your hands regularly, especially before meals in order to reduce the risk of transmitting bacteria that can make you sick. This also applies to your loved ones.
- Brush your teeth at least twice a day (before and after each meal if you have dysphagia), according to your team's directives.
- Try to do everything you can independently, but safely. This will send the right message to the brain, i.e. that it is a function that must be preserved and repaired. We will be able to help you achieve it.
- If you have new symptoms or symptoms that worsen during your hospital stay, tell us right away so that we can examine you.
- If you are able to do so, taking a walk is a great way to regain your strength!
- Fatigue is a common symptom after a stroke that is worsened by lack of sleep or disturbed sleep. The brain uses sleep to recover and heal, so try to rest as much as possible while actively participating in activity sessions.

All of this may seem very demanding, but we will be there to support you every step of the way.

## The White Boards

On the Stroke Unit 5 ON, you will find a white board in every room except for the four-bedded rooms. It is there to facilitate communication with the team and between members of the team.

It is used to indicate the precautions to take for your transfers or your ambulation in your room and to write your objectives of recovery that you have discussed with us.

It also allows members of your family to leave you words of encouragement or to leave us notes in the space provided for this effect. Do not hesitate to us ask more information about the use of this board.

## **Our team**

The team includes all those health professionals who are here to care for you.

From a medical point of view, you are followed by either a neurologist or a family doctor (a doctor dedicated to your unit). Generally, every Friday, a new doctor oversees your medical care for the coming week.

The nursing team helps you with your daily care, and includes the following people:

✓ **Nurse**

She is the leader of the team consisting of the nurse herself, the licensed practical nurse, and the orderly. She assesses and monitors your condition and progress, and adjusts the treatment plan (if necessary) in collaboration with the doctor.

✓ **Licensed Practical Nurse (LPN)**

She provides you with various care such as medication administration, dressing changes, etc.

✓ **Orderly**

She provides for your basic needs, such as washing, using the bathroom, sitting and standing, eating, etc.

✓ **Assistant Head-Nurse**

She ensures the smooth daily functioning of the unit, including management of admissions and discharges.

✓ **Unit Manager**

She ensures the proper administration and general management of the unit's staff.

✓ **Stroke Team Coordinator**

He serves as a link between team members, follows you throughout your stay and helps plan your eventual discharge.

✓ **Unit Clerk**

Works with the Assistant Head-Nurse to schedule appointments and examinations, etc.



✓ **Dietetic Technician**

She ensures you receive a diet that's right for you respecting your food preferences.

You may also see other health professionals, depending on your condition and your recovery process.

✓ **Physiotherapists**

They assess your ability to move (get up, walk, push a wheelchair, climb stairs, etc.) and begin your physiotherapy rehabilitation. Their intervention continues until you leave the hospital or before, according to your individual case.

They assess your ability to perform daily activities such as eating, washing, getting dressed, etc.

✓ **Speech Pathologists**

They assess your ability to swallow and communicate (speak, understand others, etc.).

✓ **Nutritionists**

They assess your food intake based on your diet needs, restrictions and ability to swallow.

✓ **Occupational Therapists**

Many other professionals could also be involved in your care such as medical specialists, social workers, psychologists, neuropsychologists, etc.

At Cité-de-la-Santé, we also work with many students from all disciplines. Their interventions are carried out under the supervision of their professor or a member of our team. Do not hesitate to ask if you want to know their specific role.

## Your Stay in the Hospital

**W**ith you and your family's participation, during your stay at the hospital we will take the time to do the following:

1. Establishing your diagnosis, severity and causes of your stroke, and the appropriate medical treatment;
2. Assessing the impact of your stroke on your ability to perform daily activities;
3. Establishing a plan for discharge from the hospital (discharge planning).

A STROKE IS A MAJOR EVENT THAT SHOULD BE TAKEN SERIOUSLY, EVEN IF YOU ONLY EXPERIENCED MILD DEFICITS.

### *Diagnosis, severity and causes of stroke and your medical treatment plan*

Generally, when you are admitted on the Stroke Unit 5ON, it is because the stroke has already been diagnosed. It is also possible that your diagnosis may not be final and that further investigations are required.

All patients do not present with the same symptoms when they have a stroke. The neurologist is the one establishing the severity of your stroke, which usually depends on the severity of your symptoms.

Once the diagnosis is made, the doctor attempts to establish the physical causes of the stroke. Therefore, you will undergo one or more of the following exams:

- Blood tests;
- One or more Computed Tomography (CT) scans (scans of the brain) to confirm the stroke diagnosis and monitor your progress after your stroke;



- A magnetic resonance imaging or MRI test to better see lesions in the brain and clarify the diagnosis;
- X-rays to know the condition of your lungs, or to check for fractures, etc.;



- An electrocardiogram, Holter or Cardiomemo, to find out if an electrical problem in the heart may have caused the stroke;

- An echocardiogram to find out if a physical problem in the heart may have caused the stroke;



- Carotid Ultrasound or Angioscan to establish if a problem in the arteries of the neck or brain may have caused the stroke.



Other investigations may be required depending on your situation, some of which can be done after discharge from the hospital.

The doctor will then determine with you the best treatment for your stroke, depending on the cause and your rate of recovery.

## *Consequences of a Stroke*

In addition to medical follow-up, our first goal is to determine the consequences of the stroke on you.

To do this, you (or one of your relatives) will have to answer a questionnaire about your level of autonomy BEFORE your stroke. We will need to know how you carried out your activities of daily living, like eating, washing, and going to the bathroom as well as your instrumental activities of daily living, like taking medication, preparing meals, doing housework, managing your finances, etc.

We will then evaluate how your stroke changed your ability to perform your daily activities as before. We will monitor your progress and ensure that your health status stabilizes.

## *Duration of Your Stay*

Your length of stay at the hospital will depend on a number of factors:

- the severity of your stroke;
- the speed of your recovery;
- access to tests and examinations;
- your medical stability; and
- your discharge plan.

Every person, like every stroke, is different.

## Spontaneous recovery

After a stroke, your body begins to repair the damaged areas of your brain. This allows your brain to make new connections or to repair those it can. This is referred to as “spontaneous recovery”. In order to ensure optimal recover, the brain must be well stimulated.

This is where the active participation of you, your loved ones and the staff become of the utmost importance!

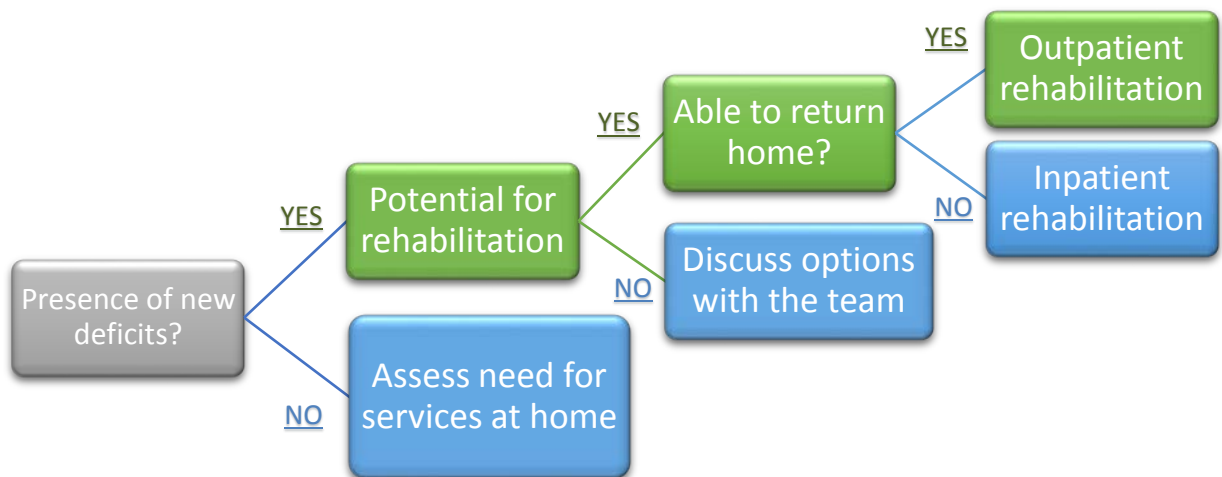
## Discharge Planning

Once the investigations/assessments are completed (unless they are planned to be performed as an outpatient) and the treatment plan is established, we will need to decide together on the appropriate discharge plan.

Depending on the situation, you might:

- return directly to your home with or without CLSC services;
- begin rehabilitation on an inpatient or outpatient basis; or
- meet with a social worker to discuss other options that are available to you.

The following figure illustrates the different options available:



## *Return Home*

In order to decide if you are able to return home, it is important to know if:

1. You can return home safely (depending on your condition, your risk of falling, etc.);
2. You have people around you who can help you with your deficits; and
3. Your home is safe (possibility of using a walker, risks of using stairs, etc.).

The CLSC can be involved with the provision of some services at home which allows you to return home safely. You may also go directly to the CLSC to receive certain services. You may also go directly home without any services if your stroke caused little or no symptoms or changes in your ability to perform your daily activities (such as washing, dressing, eating, dressing).

## *Rehabilitation*

If you have deficits because of your stroke, we will first try to determine your “rehabilitation potential”: your ability to improve with therapy. It will then be necessary to establish whether you are a candidate or not to a follow-up in a rehabilitation hospital.

REHABILITATION IS AN ONGOING PROCESS THAT BEGINS WITHIN THE FIRST DAYS AFTER YOUR STROKE.

There are several criteria for determining your ability to be transferred to a rehabilitation hospital, including:

1. Having deficits that prevent you from carrying out your daily activities;
2. Being motivated to undergo a rehabilitation program;
3. Having the stamina to complete a rehabilitation program (being able to participate in at least two 30-minute sessions of activity per day);
4. Demonstrating an improvement during the acute hospital stay.

If you are a candidate for an admission to a rehabilitation hospital, together with your team you will establish whether this will be done on an inpatient basis (you are hospitalized in a rehabilitation hospital) or outpatient basis (you return home and from there participate in a few weekly appointments to the rehabilitation hospital for your treatments).

If you live in Laval and you need rehabilitation, the Jewish Rehabilitation Hospital will be the place where you will go when you leave the hospital.



### **Jewish Rehabilitation Hospital**

3205 Alton-Goldbloom Place

Laval, Quebec

H7V 1R2

Telephone: 450-688-9550

If you live outside Laval, the Stroke Team Coordinator will discuss the location of your rehabilitation centre with you.

## *When Discharge Home is Not Possible*

If you are not a rehab candidate and returning to your home is deemed unsafe, a social worker will get involved and assess options you may have for discharge planning.

## **The Day of Discharge**

Regardless of the day of your discharge, an identified person from your family should be available to pick you up. In the event that none of your loved ones are available, please inform your nurse. They will arrange for a taxi (or paratransit transportation, if you are already registered) to be requested for you.

Please note that the costs associated with this transportation will be your responsibility or that of your family. It can also be covered by the paratransit transportation company if you are already registered.

If your condition permits it, you may be asked to vacate the room a few hours before your discharge is signed. If this is the case, you will be asked to wait on the unit in a designated chair. Please note that any care or services required will be provided while you wait.



THE CISSS OF LAVAL IS COMMITTED TO PROVIDING APPROPRIATE CARE AND SERVICES TO ALL PATIENTS. FOR THIS REASON, WE ASK FOR YOUR UNDERSTANDING IN HELPING US MAKING SURE ANOTHER PATIENT IN NEED MIGHT GET A ROOM AS QUICKLY AS POSSIBLE AFTER YOU ARE DISCHARGED FROM THE HOSPITAL.



## Before Leaving the Hospital

**Have you  
thought of  
everything?**

Make sure you have:

- all your belongings and toiletries;
- all your valuables deposited in the hospital's safety deposit box;
- your hospital card and your Medicare card;
- your discharge prescriptions and all the information for taking your medication properly;
- information about activities you can do and restrictions you may have (see below);
- the list of appointments already scheduled and those you must schedule yourself.

## **Recommendations Upon Discharge**

You are now ready to go home. The following recommendations will help reduce your risk of having another stroke, facilitate your outpatient follow-up, and help accelerate your recovery:

### **Food**

- Ensure you follow your diabetic diet and your prescriptions for diabetes medications.
- Try to follow a Mediterranean diet. A nutritionist can help you create a diet plan. Talk to your doctor or healthcare provider about the Mediterranean diet.
- Follow Éduc'alcool's recommendations for alcohol consumption: maximum 1–2 glasses of alcohol per day, maximum 5 days a week.

### **Resuming Activities and Stress Management**

- Gradually resume your activities at home. You must avoid spending your days sitting down.
- Incorporate regular physical activity into your routine. During the first month after the stroke, engage in mild to moderate activity (no shortness of breath). After that, you can gradually increase the level of intensity from moderate to high, as directed by your doctor.
- Decrease your sources of stress wherever possible, as they may contribute in increasing your risk of stroke. Cible Santé is an organization that can help you with this (see the Resources section).

### **Smoking**

- Stop smoking; it is a major cause of stroke. You can call our Smoking Cessation Centre if you need help quitting (see the Resources section).

## **Driving a Motor Vehicle**

- One month after your stroke, you will be able to restart driving.
- If your neurologist gives you the authorization at the follow-up appointment, you can resume driving.
- You must undergo an evaluation of your ability to drive before you can resume driving.  
You will receive a follow-up phone call within a few weeks regarding the evaluation.
- You can no longer drive. Talk to your nurse or doctor about your alternatives.

## **Travelling**

- In general, a three-month delay is recommended or required before being able to fly and some insurance companies require longer delays.  
Talk to your neurologist to find out when you will be able to fly.  
They might be able to provide you with a medical note to this effect.

## **Things to Monitor at Home**

- Monitor your blood pressure.  
Take your blood pressure in the morning when you wake up and then one more time during the day (by alternating morning, afternoon, and evening).  
Write down your blood pressure results and show them to your doctor at your follow-up appointment.  
Once your blood pressure is well controlled, you can check it only as needed.
- Sleep apnea can increase your risk of stroke.  
Speak to your doctor if you have the following symptoms:
  - significant fatigue upon waking up and throughout the day;
  - frequent and uncontrolled sleepiness and falling asleep;
  - significant snoring;
  - headaches upon waking up;
  - irritability;
  - memory problems;
  - feeling of choking/suffocating at night.

## **Medical Follow-Ups and Other Appointments**

- Plan a follow-up appointment with your family doctor two or three weeks after your discharge from the hospital.  
This will allow you to inform him/her that you had a stroke and ensure proper/close medical follow-up.
  
- You have been referred to Cible Santé, a program geared toward healthy lifestyle habits.  
A staff member from this program will call you to make an appointment.
  
- You have been referred to the outpatient rehabilitation program.  
Someone will communicate with you to make an appointment. Depending on your living area and time of the year, this might take up to four weeks.

## Resources

1. **AIISPO — Association des infirmières et infirmiers en soins podologiques du Québec** (<https://www.aiispq.org/>):

Nurses that provide private foot care services.

**Tel:** 514-344-7212 or toll-free at 1-800-771-9664

2. **ALPA — Association lavalloise des personnes aidantes** (<http://www.aldpa.org/>):

It offers respite at home, individual or group psychosocial support, social activities, documentation, training and conferences, and resources to listen and help.

**Tel:** 450-686-2572

3. **Meals on Wheels Laval** (<https://www.popotesroulantes.org/>):

This organization provides home delivery of hot meals for seniors or people with loss of autonomy.

**Tel:** 450-627-2530 extension 64922, option 1

4. **AVC-Aphasie Laval** (<http://www.avcaphasielaval.ca/>):

This is a community centre that offers stimulating activities, outings and services to stroke survivors with or without aphasia. It is a point of contact for stroke survivors, caregivers and family members, which promotes the importance of reintegrating members into the community.

**Tel:** 450-937-3666

5. **Smoking Cessation Center** (<http://www.lavalensante.com/soins-et-services/liste-des-soins-et-services/dependances/tabagisme/>):

This center offers individual consultations and group workshops to quit smoking.

**Tel:** 450-978-8300 (option 1), ext. 13169

6. **Centre de bénévolat et Moisson Laval** (<http://benevolatlaval.qc.ca/>):

It provides various services including volunteer transportation for medical appointments.

**Tel:** 450-681-6164

7. **Cible Santé:**

It offers training sessions and follow-up with a nutritionist, nurse or kinesiologist to help you adopt healthy lifestyle habits.

Your stroke team coordinator, doctor, nutritionist or other health professional can register you.

A staff member from Cible Santé will then contact you.

8. **Coopérative de soutien à domicile de Laval** (<http://www.cooplaval.com/>):

It offers housekeeping, clothing and bedding maintenance, meal preparation, respite and personal assistance in your home.

**Tel:** 450-972-1313

9. **Éduc'alcool** (<http://educalcool.qc.ca/>):

Brings together various institutions who implement prevention, education and information programs to help young people and adults make responsible and informed decisions regarding about drinking and the circumstances in which they drink.

**Tel:** 514-875-7454 or toll-free at 1-888-ALCOOL1

10. **Heart and Stroke Foundation of Canada**

(<http://www.heartandstroke.ca/>):

It is a non-profit organization dedicated to advocacy, education and funding of research on stroke and heart disease in Canada.

**Tel:** Toll-free at 1-888-473-4636

11. **Support Group for Family Caregivers**

(<http://www.lavalensante.com/en/care-and-services/list-of-care-and-services/workshops-and-support-groups/support-group-for-family-caregivers/>):

12-week caregiver support program, one two-hour session per week, to offer support to the individual in their role as a caregiver.

**Tel:** 450-978-2121, ext. 2153

12. **The Guide to Practical Support for Caregivers**

(<http://gpsprocheaidant.ca/en/>):

It is a simple to read practical guide to help caregivers provide care to a loved one.

**Tel.:** Caregiver Helpline 1-855-8LAPPUI (1-855-852-7784)

### **13. Ordre des ergothérapeutes du Québec**

(<http://www.oeq.org/>):

It is the official website of the Order. Here you can find occupational therapy services in the private sector (for example, to resume driving).

**Tel:** 514-844-5778 or toll-free at 1-800-265-5778

### **14. Ordre des orthophonistes et audiologistes du Québec**

(<http://www.ooaq.qc.ca/>):

It is the official website of the Order where you can find speech therapy services in the private sector (for example, to monitor your problems with aphasia, dysarthria or swallowing).

**Tel:** 514-282-9123 or toll-free at 1-888-232-9123

### **15. Ordre des psychologues du Québec**

(<https://www.ordrepsy.qc.ca/>):

It is the official website of the Order where you can find psychology, neuropsychology or psychotherapy services in the private sector.

**Tel:** 514-738-1223 or toll-free at 1-800-561-1223

### **16. Ordre des travailleurs sociaux et thérapeutes conjugaux**

(<https://otstcfq.org/>):

It is the official website of the Order where you can find social work or marriage counselling services in the private sector.

**Tel:** 514-731-3925 or toll free at 1-888-731-9420

### **17. Ordre professionnel de la physiothérapie du Québec**

(<https://oppq.qc.ca/>):

It is the official website of the Order where you can find physiotherapy services in the private sector.

**Tel:** 514-351-2770 or 1-800-361-2001



**18. Ordre professionnel des diététistes du Québec (<https://opdq.org/>):**

It is the official website of the Order where you can find the nutritional services in the private sector.

**Tel:** 514-393-3733 or toll-free at 1-888-393-8528

**19. Canadian Partnership for Stroke Recovery**  
(<https://www.stroking.ca/>):

It is Canada's reference website on stroke. Here you will find a lot of information about stroke.

**20. Passeport Santé (<https://www.passeportsante.net/>):**

It is a health information website. Excellent reference for everything related to health.

**21. Paratransit Laval**  
(<http://www.stl.laval.qc.ca/en/transport-adapte/bienvenue-a-bord/>):

It offers transportation service (free for seniors 65 and over) for all types of travel (not just for medical appointments) when you have permanent disabilities that limit your movement.

**Tel:** 450-688-6520

**22. Family Caregiver Benefit for Adults**  
(<https://www.canada.ca/en/services/benefits/ei/family-caregiver-adults.html>):

It allows eligible caregivers to receive up to 15 weeks of financial assistance to provide care or support to a critically ill or injured adult.





Learn to recognize signs quickly.

**V**isage

Est-il affaibli?

**I**ncapacité

Pouvez-vous lever les deux bras normalement?

**T**rouble de la parole

Trouble de prononciation?

**E**xtrême urgence

Composez le 9-1-1.

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5ON staff

You can reach us  
by calling  
**450 668-1010**, ext. 23477.

*Centre intégré  
de santé  
et de services sociaux  
de Laval*

Québec 