



POLICY

This policy outlines the minimal procedures during a Mobile Integrated Health (MIH) encounter for a patient who is experiencing difficulties from a recent stroke.

PURPOSE

Provide baseline guidance for the MIH provider on management of patients with a recent stroke.

BASIC MEDICAL CARE

Reference and apply all applicable OEM standards of care. Identify, treat, and attempt to stabilize any patient who is identified as acutely ill. Activate the municipal transport service if indicated. The most relevant standards of care are as follows:

- Universal Care
- Stroke
- BEFAST
- LVO
- Medication List

SOCIAL DETERMINANTS OF HEALTH (SDOH)

Reference and apply all applicable patient assessment screens in addition to OEM MIH Standards of Care. An emphasis should be placed on the following SDOH:

- Access to healthcare
- Understanding condition and care plan

STANDARD OF CARE

1. Apply General MIH Operational Guidelines.
2. Review/perform history and conduct an appropriate physical examination with specific consideration of the following:
 - a. Episodes of falls or injury, new or changing focal neurological deficits including vision changes or speech changes, new pressure ulcers, trouble swallowing or eating, depression, coughing or fevers.
 - b. New or changing focal weakness, vision changes, ambulation difficulties, speech changes, trouble swallowing, memory issues, productive cough with abnormal lung sounds, flat affect, and pressure ulcers.
3. Review pathophysiology of stroke, including sign and symptoms of a new TIA/stroke, with the patient.
4. Review and advise on patient's medication list and current access to medications including dosing schedule, amount, and logs of administration to confirm adherence.
5. Review and advise the patient on complications after a stroke including trouble speaking, walking, eating, swallowing, pneumonia, depression, and pressure ulcers based on their current deficits.
6. Review medical provider orders including diet, exercise, movement, assist devices to include walkers, wheelchairs, hand devices, and other adjuncts.
7. Review and advise on when to call health care providers related to TIA/Stroke and when 911 is most appropriate with hand out in supporting documents below.



Mobile Integrated Healthcare
STROKE

- 8. Note and record patient’s concerns about current treatment and risk factors including medication adherence, medication access, exercise, weight, alcohol consumption, smoking, and dietary compliance.
- 9. Provide correction action for the patient if indicated.

REFERRALS

- Milwaukee County Resources: OEM MIH Resource Contact List
- Department Specific Resources: Department Specific Operational Guidelines

EMS AGENCY ADDITIONAL POLICIES

Individual EMS Agencies within Milwaukee County are afforded the flexibility to add additional aspects to each MIH guideline. These additional aspects shall be approved by the OEM Medical Direction Team.

SUPPORTING DOCUMENTS






Example of Stroke Hand-out on following page



**Mobile Integrated Healthcare
STROKE**

Signs of Stroke in Men And Women

If any of the following signs appear suddenly, call 9-1-1 right away.

-  Numbness or weakness in the face, arm, or leg, especially on one side of the body.
-  Confusion or trouble speaking or understanding speech.
-  Trouble seeing in one or both eyes.
-  Trouble walking, dizziness, or problems with balance.
-  Severe headache with no known cause.

