



## Stroke Management: Nursing Roles

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**Introduction:** The subacute and long-term assessment and management of patients who have suffered a stroke includes physical therapy and testing to determine the precise etiology of the event so as to prevent recurrence. The acute management differs. Immediate goals include minimizing brain injury, treating medical complications, and moving toward uncovering the pathophysiologic basis of the patient's symptoms.

**Methods:** This is a review paper that report up to date finding with review some research papers and databases.

**Results:** Sudden loss of focal brain function is the core feature of the onset of ischemic stroke. However, patients with conditions other than brain ischemia may present in a similar fashion. The goals in the initial phase include: ensuring medical stability, with particular attention to airway, breathing, and circulation, quickly reversing any conditions that are contributing to the patient's problem, determining if patients with acute ischemic stroke are candidates for thrombolytic therapy, moving toward uncovering the pathophysiologic basis of the patient's neurologic symptoms. Time is of the essence in the hyperacute evaluation of stroke patients. In addition to stabilization of airway, breathing, and circulation, and rapid neurologic evaluation, early key management issues that often arise in acute stroke include blood pressure control, fluid management, treatment of abnormal blood glucose levels, swallowing assessment and treatment of fever and infection. Care in a dedicated stroke unit is associated with better outcomes.

**Conclusion:** The main goals in the initial phase of acute stroke management are to ensure medical stability, to quickly reverse conditions that are contributing to the patient's problem, to determine if patients with acute ischemic stroke are candidates for thrombolytic therapy, and to begin to uncover the pathophysiologic basis of the neurologic symptoms.

**Key words:** stroke management, guidelines, nursing



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