



# Stroke

The University of Zambia  
School of Public Health ◦ Family Medicine MMed Program



## Stroke Admission Checklist

### Also think

#### Differential Diagnosis

- ✓ Focal seizure with Todd's Paralysis
- ✓ Space occupying lesion
- ✓ Systemic infection (e.g., meningitis)
- ✓ Subdural hematoma
- ✓ Hypoglycemia

### If RVD-R

#### Evaluate for CNS OIs

- ✓ CAT, TAT, TB
- ✓ Consider LP
- ✓ Many can cause vasculitis and be complicated by stroke

### Immediately

#### Pharmacologic Management

- ✓ Within 24 hours of last normal: ASA 300mg followed by 75mg
- ✓ Statin (Atorvastatin 40mg)
- ✓ Permissive HTN up to 180/105 for up to 72 hours after last normal

#### Non-Pharmacologic Management

- ✓ CT Head (before LP if focal deficits)
- ✓ *NG if aspiration risk*
- ✓ Keep head of bed elevated
- ✓ Turn patient q2 hours if needed
- ✓ Use diapers if needed

### Investigations

- |               |        |       |               |
|---------------|--------|-------|---------------|
| ✓ A1c, lipids | ✓ ECG  | ✓ HIV | ✓ LP if RVD-R |
| ✓ RBS         | ✓ Echo | ✓ RPR | ✓ TB          |

### Prior to discharge

**72 hours after last normal: drop BP to < 140/90**

BP goal < 140/90  
@ discharge

Continue ASA and  
Statin

Physiotherapy

OPD follow-up within  
4 weeks

Differential



SCAN ME

**DO NOT DELAY CT HEAD**

**PERMISSIVE HTN x 72 HOURS**