The post-stroke hospital discharge checklist has been developed to help healthcare professionals to arrange and prepare patients and family for the hospital discharge after stroke. This checklist follows an order set format and contains recommendations with key aspects for post-stroke hospital discharge in patients after an ischemic stroke or a transient ischemic attack. This checklist is intended to be completed by the medical team in advance to discharge the patient. The specific actions described in the checklist can be further adapted to be implemented locally as standardized patient order set.

**STROKE INFORMATION**

**Symptoms Onset / Last Time Seen Well:** ___ / ___ / ___, ___

**NIHSS at discharge:** ___________ and **mRS at discharge:** ___________

**Acute treatment:**
- [ ] IV Thrombolysis
- [ ] Mechanical Thrombectomy
- [ ] Hemicraniectomy

**Definite diagnosis at discharge:**
- [ ] Ischemic stroke
- [ ] Transient ischemic attack
- [ ] Stroke mimic: _________________________

**STROKE WORKUP**

Consider if minimum investigations are complete:

- **Brain Imaging:**
  - [ ] NCCT
  - [ ] MRI

- **Vascular Imaging:**
  - [ ] Carotid/Vertebral Doppler
  - [ ] CTA
  - [ ] MRA
  - [ ] DSA

- **Perfusion Imaging:**
  - [ ] CTP
  - [ ] MRP

- **Echocardiography:**
  - [ ] Transthoracic
  - [ ] Transesophageal

- **Cardiac Rhythm Monitoring:**
  - [ ] Prolonged ECG monitoring
  - [ ] 24h Holter

- **Laboratory Tests:**
  - [ ] Antiphospholipid antibodies
  - [ ] ANA, ANCA, ESR, CRP, rheumatoid factor, complement levels
  - [ ] Toxicology screen

- **Chest, abdomen and pelvis CT to screen for malignancy**

**STROKE ETIOLOGY** (Assign one or more possible diagnoses based on clinic and workup)

- [ ] Large artery atherosclerosis: ___________
  - [ ] Intracranial
  - [ ] Extracranial

- [ ] Cardioembolism: ___________
  - [ ] Atrial fibrillation
  - [ ] Bioprosthetic and mechanical heart valves
  - [ ] Patent Foramen Ovale
  - [ ] Other: _________________________

- [ ] Small vessel disease

- [ ] Other: Arterial dissection
- [ ] Vasculitis
- [ ] Hypercoagulable states

- [ ] Stroke of Undetermined Cause / Cryptogenic Stroke
## POST-STROKE COMPLICATIONS

**Check if the patient had any complication/s during hospitalization:**
- [ ] Myocardial infarction / Heart failure
- [ ] Urinary tract infection
- [ ] Pulmonary embolism
- [ ] Aspiration pneumonia
- [ ] Deep vein thrombosis
- [ ] Pressure-induced skin injury
- [ ] Recurrence/extension of stroke
- [ ] Other: ______________________

## RECOMMENDATIONS

### Secondary prevention
(Consider according to the etiological diagnosis upon discharge)

- Antiplatelets: [ ] Aspirin and/or [ ] Clopidogrel and/or [ ] other: ______________________
- Anticoagulants: [ ] VKA or [ ] DOAC or [ ] other: ______________________
- [ ] Statins
- [ ] Anti-hypertensive treatment
- [ ] Diabetes treatment

### Rehabilitation and discharge destination

**If the patient will need rehabilitation, check all the modalities that apply:**
- [ ] Physiotherapy
- [ ] Occupational therapy
- [ ] Speech language pathology
- [ ] Dietician
- [ ] Social work
- [ ] Other: ______________________

**Check the discharge destination:**
- [ ] Home
- [ ] Other hospital
- [ ] Rehabilitation facility
- [ ] Long term care facility/nursing home

### Follow up

- [ ] Assign the follow-up in the outpatient clinic.
- [ ] If the patient will need a follow-up neuroimaging, define type and time of study.
- [ ] If the patient will need specific work-up studies, inform them and coordinate the necessary arrangements.
### Secondary prevention targets

#### Discuss with the patient and inform prior to discharge about these important objectives for preventing stroke recurrence:

- Blood pressure: Systolic less than 130 mmHg and Diastolic less than 80 mmHg
- LDL - Cholesterol: less than 1.8 mmol/dl (or 70 mg/dL)
- Triglycerides: less than 135 mg/dL
- HbA1c: less than 7.0%

#### Discuss with the patient and inform prior to discharge about these important lifestyle modifications for preventing stroke recurrence:

- Diet: Low sodium ☐ Low fat ☐ Low cholesterol ☐ Diabetes ☐
- Physical activity and exercise
- Body weight: BMI < 25 kg/m²
- Waist circumference: < 102 cm - males or < 88 cm - females
- Smoking cessation with counseling and/or drug therapy

### References

- https://www.strokejournal.org/article/S1052-3057(17)30527-X/fulltext
- https://bmjopenquality.bmj.com/content/2/1/u202037.w1095
- https://vghneuro.ca/clinical-care/discharge/