

STROKE

[Early use of anti-clotting medications](#): Percent of ischemic stroke patients receiving anti-clotting medications within 48 hours of hospitalization.

A common cause of ischemic stroke is a blood clot that blocks blood flow in the brain. Anti-thrombotic medications, such as aspirin and others, have been shown to prevent further clotting and to restore blood flow to vessels in the brain. This helps to prevent further injury to the brain, and potentially reduce the severity of the stroke and risk of death.

[Use of anti-coagulant medications](#): Percent ischemic stroke patients receiving coumadin (warfarin) for atrial fibrillation.

Some ischemic stroke patients may also have a condition called atrial fibrillation. Atrial fibrillation prevents the heart from beating in a normal rhythm and can cause small blood clots to form and be released into the blood stream. If untreated, these small clots can cause further injury to the brain. Coumadin (warfarin) is an anti-coagulant medication that prevents new clots from forming and does not allow existing clots to get any bigger. This helps to prevent further injury to the brain, and potentially reduce the severity of the stroke and risk of death.

Some patients with atrial fibrillation cannot take these anti-coagulant medications and are not included in this measure.

[Prevention of leg vein blood clots](#): Percent of eligible patients receiving leg vein clot prevention by the second day of hospital stay.

After a patient suffers a stroke, they may need to rest in bed and be less active for a period of time before becoming active again. Leg vein blood clots, also known as deep vein thrombosis (DVT), can form when blood flow slows in the legs due to inactivity. To prevent these blood clots from forming, we care for patients by using elastic stockings, leg exercises and medicines to make up for their inactivity.

[Lipid profile blood test](#): Percent of eligible patients receiving a lipid profile blood test during their hospital stay.

Many ischemic stroke patients also have a condition causing high cholesterol in the blood stream called hyperlipidemia. A lipid profile blood test measures various levels of cholesterol in the patient's bloodstream. Lipid levels should be tested regularly because this condition may cause blockages to form in a patient's blood vessels.

[Cholesterol-lowering medications at discharge](#): Percent of eligible patients receiving cholesterol-lowering medications for continued treatment when they left the hospital.

For certain patients, cholesterol-lowering drugs are important for controlling lipid levels in the bloodstream. Patients with a low density lipoprotein (LDL) that is greater than 100 mg/dl should receive cholesterol-lowering medications when they leave the hospital. Patients who were on a cholesterol-reducer prior to admission should also receive cholesterol-lowering medications when they leave the hospital.

[Anti-clotting medications at discharge](#): Percent ischemic stroke or transient ischemic attack (TIA) patients receiving a prescription for anti-clotting medications when they left the hospital.

Once a patient has had a stroke (and may still have risk factors for stroke), they need to continue treatment to prevent further clotting in blood vessels. Anti-thrombotic medications, such as coumadin (warfarin), aspirin and others, have been shown to prevent further clotting.

[Advice or medication to stop smoking](#): Percent of smokers receiving advice or medication to stop smoking.

Smoking is a risk factor in causing strokes or recurrence of a stroke. Receiving advice about stopping smoking is important for stroke patients who are smokers, or who have smoked within the past year. Medications such as nicotine (nicoderm) can also help patients quit smoking.