Case Study: Patient with TIA

**Goal:** Providing health care plan for a patient with Transient Ischemic Attack (TIA).

**Clinical Scenarios:**
A patient was diagnosed to have an acute left cerebral stroke. As a health professional you are to present your result using SOAP method.

Slide 2 is interactive and contains Quizzes and their Feedbacks by professions (major).

A click on a Quiz takes you to the questions, which you are to answer using the SOAP method.

A Click on the arrow takes you back to slide 2. Similarly, a click on a Feedback takes you to the Feedback, and a click on the arrow takes you back to slide 2.
## Interactive SOAP note on TIA

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<td>CC: Pt presents with acute left cerebral stroke  HxCC: Pt had TIA 3 weeks prior, saw pt 3 days prior for drug noncompliance and to develop new patient service, last night pt experienced facial paralysis and loss of sensation on R side, also paralysis and loss of sensation of R arm, pt also has dysarthria PMHx: TIA, atrial fibrillation, HTN, hyperlipidemia, low back pain PSHx/Hosp: One hospitalization for TIA 3 weeks prior, denies surgeries FHx: 1st degree HTN, MI, depression SocHx: Smoker, little EtOH use, poor diet and no exercise ROS: no obtained due to dysarthria</td>
<td>VS: BP: 150/97 HR: 78 Resp: 24 Temp: 97.6  Gen: Pt frustrated and distressed about dysarthria and new symptoms HEENT: Fundascopic exam shows AV nicking, R sided homonymous hemianopsia with eye deviation to left CV: irregularly irregular Resp: CTA Neuro: R sided flaccid paralysis facial and upper extremity, loss of discriminative touch, pt has broken speech, still following simple commands CN nerves intact, hemiplegia of R leg with positive Babinski MS/OMM: See prior</td>
<td>1) Acute left cerebral stroke  2) Dysarthria, secondary to stroke  3) Atrial fibrillation  4) HTN  5) Hyperlipidemia  6) low back pain  7) smoker</td>
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QUIZ 1: MEDICAL DOCTOR

- As a **medical doctor**, what are the most important issues for the patient?
- What do you think should be key elements in the plan to address this issue?
- What is the best method of pain control in patient with TIA?
- What drugs have been approved by FDA for the treatment of TIA?
- What is the latest on the management of a patient with TIA?
- Which apps in the iTunes stores could you use to find these information?
- How could you find do these? Show detail paths?
QUIZ 2: NURSE

• As a **nurse**, what are the most important issues for the patient?
• What do you think should be key elements in the plan to address this issue?
• What is the best method of pain control in patient with TIA?
• What drugs have been approved by FDA for the treatment of TIA?
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<td>Nurse</td>
<td>Patient states difficulty using his right arm and has also noticed he is having trouble talking. He said the right side of his face “doesn’t feel right.”</td>
<td>MRI and CT of left sided cerebral stroke (MCA) stroke without hemorrhage. Patient shows paralysis of right arm and face. A loss of sensation in the right arm and face is also noted. He has difficulty articulating his speech to answer questions, but he demonstrates the ability to understand speech by following instructions.</td>
<td>Focused assessment for stroke: Muscle strength in arms is not equal. Right sided muscle weakness noted in the upper extremity. Patient is unable to discriminate between dull or sharp sensation on the right side of the face or right upper extremity. Patient is unable to smile, frown, or raise his eyebrows symmetrically. Deficit is noted on the right side of the face.</td>
<td>Provide patient and family with support and education on his condition. Involve physical therapy in order to deal with his extremity paralysis. Help the patient in coping with his losses. Help the patient and family determine how he will receive care after he is discharged. Also help determine what resources they will use for this care.</td>
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QUIZ 3: SLP

• As a SLP, what are the most important issues for the patient?
• What do you think should be key elements in the plan to address this issue?
• What is the best method of pain control in patient with TIA?
• What drugs have been approved by FDA for the treatment of TIA?
• What is the latest on the management of a patient with TIA?
• Which apps in the iTunes stores could you use to find these information?
• How could you find do these? Show detail paths?
## FEEDBACK3: SLP

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<td>SLP</td>
<td>PH came to the clinic following a left sided MCA stroke without hemorrhage. PH current state: paralysis of right arm and face, loss of sensation in right arm and face, dysarthria, dysphonia, and can follow simple commands.</td>
<td>Videofluoroscopy was completed to assess PH ability to swallow. PH scored a 7 on the aspiration scale (material passes below vocal folds and is not ejected despite effort) on thin liquids, a 4 (material contacts vocal folds, but is ejected out) on purée and thickened liquids.</td>
<td>Findings from the Videofluoroscopy concluded PH to have dysphagia. Aspiration correlated with PH previous diagnosis of dysphonia. PH vocal folds aren't closing well causing the aspiration to occur. PH also has dysarthria, which correlates with his decreased muscle weakness to swallow.</td>
<td>Enroll PH in swallowing treatment. Consult nutritionist on proper diet for PH.</td>
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QUIZ 4: Nutritionist

- As a **nutritionist**, what are the most important issues for the patient?
- What do you think should be key elements in the plan to address this issue?
- What is the best method of pain control in patient with TIA?
- What drugs have been approved by FDA for the treatment of TIA?
- What is the latest on the management of a patient with TIA?
- Where can you find some nutrition information for a patient with TIA?
- Which apps in the iTunes stores could you use to find these information?
- How could you find do these? Show detail paths?
# FEEDBACK4: Nutritionist

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| Nutritionist | Lipid panel and BMP, FBT, depression | Left cerebral stroke. Paralysis and loss of sensation in the right arm and face. | Consult SW to check whether he is able to care for himself, can he live independently or do we need to look into extended care facilities.  
- Analyze the ability to chew and swallow (chalking may happen)  
- Provide food with consistency of pudding, make food less thick and prevent chalking  
- Stick to the DASH diet |
QUIZ 5: Social Worker

• As a Social worker, what are the most important issues for the patient?
• What do you think should be key elements in the plan to address this issue?
• What is the best method of pain control in patient with TIA?
• What drugs have been approved by FDA for the treatment of TIA?
• What is the latest on the management of a patient with TIA?
• Which apps in the iTunes stores could you use to find these information?
• How could you find do these? Show detail paths?
# FEEDBACK5: Social worker

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<td>Social worker</td>
<td>Pt presents with acute left cerebral stroke  HxCC: Pt had TIA 3 weeks prior, saw pt 3 days prior for drug noncompliance. Patient came to clinic following a left sided MCA stroke without hemorrhage. He reports difficulty using right arm and has difficulty with speech.</td>
<td>Reports indicate paralysis of right arm and face, loss of sensation in right arm and face, dysarthria, dysphonia. Difficulty verbalizing needs, articulating speech, and becomes frustrated quickly when he cannot verbalize what he wants. He reports his mood is depressed, affect sad, tearful, though he is unable to smile, frown, or raise eyebrows symmetrically, according to nursing notes.</td>
<td>Patient’s mood was depressed, affect sad. He remains frustrated with his situation but is hopeful for recovery. Despite previous concerns of relying on others for help, he is welcoming to the idea of his girlfriend taking on a more substantial supportive role in his recovery. He acknowledges he cannot get directly back to work and this is frustrating to him but he is agreeable to being active in his recovery to resume his life, maintain functioning, and get back to work.</td>
<td>Writer will coordinate appropriate referrals to needed resources in the community. Goal: Help adapting to a new situation—he may remain dependent and receive PT rehabilitation; link with community mental health agency to address emotional support—may necessary referrals to home health nursing; identify limitations of support; explore resources in the community for unmet needs; mediate family problems if needed; discuss the use of financial counseling; apply for eligible financial resources; encourage therapeutic recreation. Additionally, provide family with caregiver support, kind and clear discussion of realistic expectations, assist in the transition of inpatient rehab to outpatient programs.</td>
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QUIZ 6: PT

• As a **PT**, what are the most important issues for the patient?
• What do you think should be key elements in the plan to address this issue?
• What is the best method of pain control in patient with TIA?
• What drugs have been approved by FDA for the treatment of TIA?
• What is the latest on the management of a patient with TIA?
• Which apps in the iTunes stores could you use to find these information?
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**FEEDBACK6: PT**

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<td><strong>PT</strong></td>
<td>Pt presents post MCA without hemorrhage</td>
<td>R arm and face paralysis, loss of sensation in R arm and face, dysarthritic, can follow simple commands. Strength: will show 0/5 MMT for all UE musculature crossing GH, elbow, wrist, hand joints. ROM: 0 degrees for all AROM of affected UE. If no capsular/non contractile pathology, PROM should be normal Sensation: Will have complete loss of sensation in dermatome distribution from C3, C5-T1 and will have no response to somatosensory testing. Pt will present with no sensation in trigeminal nerve distribution on R side Pt may demonstrate deficits in cognitive function, which should be assessed by PT</td>
<td>Do comprehensive EBP search to locate the best available evidence for treatment strategies post stroke. (See attached document for resources). Maintain integrity of ROM; perform PROM of all UE joints on affected and non affected side. Maintain strength of all intact UE musculature, especially scapular stabilization muscles. Maintain cardiovascular fitness. Work with patient on repeated, simple tasks. Help pt with functional abilities and ADL’s, so independence can be maintained.</td>
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