

# **EDUCATION** Stroke



AFP in Practice questions are designed to get you started in a small group learning (SGL) activity in your practice or with colleagues. Requirements to earn 30 Category 1 CPD points for a SGL activity are: minimum of four and a maximum of 10 people, minimum of 8 hours of discussion in a year, and at least two GPs. Groups may include anyone else who has an interest (ie. practice nurses, community health workers, allied health professionals). A kit with all the instructions and forms you need is available at www.racgp.org.au/ afpinpractice. You can also earn Category 2 points based on these questions at AFP practice challenge. Visit www.racgp.org.au/practicechallenge. Carolyn O'Shea

## **Learning objectives**

After completion of this activity participants will be able to:

- identify the communication difficulty of an individual patient and use a method to maximise communication with the patient
- apply a protocol for modifying risk of atrial fibrillation
- construct a locally relevant resource list for patients and carers poststroke
- suggest methods to improve management of stroke risk factors in your practice
- prepare a triage protocol for your practice to minimise delay to presentation of potential stroke patients.

# Category 1 – SGL questions

### Domain 1 - Communication skills and the patient-doctor relationship

ICPC codes: Z22, K90

Stroke can cause a range of communication problems including language, articulation and comprehension. These require the use of strategies or resources to maximise the patient's communication.

\* Suggested learning activity: brainstorm the range of communication problems poststroke. Then as a group, discuss methods of improving communication for patients with these communication problems.

#### Domain 2 - Applied professional knowledge and skills

ICPC codes: K78, N28; process codes -44, -50

There are a number of modifiable risk factors for stroke, one of which is atrial fibrillation. A number of treatment options are available, including warfarin, antithrombotics and aspirin. Some potential sources of information are:

 The National Prescribing Service: www. nps.org.au/site.php?content=/html/news. php&news=/resources/NPS\_News/news30

- http://www.nps.org.au/site.php?content=/ html/ppr.php&ppr=/resources/Prescribing Practice\_Reviews/ppr24
- The Cochrane Library: www.mrw. interscience.wiley.com/cochrane/clsysrev/ articles/CD006186/frame.html.
- \* Suggested learning activity: discuss in your group a protocol for when to use which (if any) treatment option. Then apply it to some of your patients and identify if they are being managed appropriately. Then revise the protocol or management as indicated.

#### Domain 3 – Population health and the context of general practice

ICPC codes: K90, Z10, Z22; process codes -66,

-57

Stroke survivors who return to the community, and their carers, may have complex care needs and can benefit from good discharge planning and primary care. This may involve services for the patient, and supports for carers.

\* Suggested learning activity: produce a resource list of services for patients and carers. This could start with group brainstorming, then refine by searching local resources such as directories and the internet. Then create a resource list and contact details for easy use when needed in consultations and care planning.

#### Domain 4 - Professional and ethical role

ICPC codes: K89, K90; process code -44

Stroke has some modifiable risk factors, including hypertension, smoking, elevated cholesterol, physical inactivity, obesity, diabetes and atrial fibrillation. General practitioners can play a role is assisting patients to change these risk factors.

\* Suggested learning activities: design and perform an audit of your practice population with regards to one of these risk factors and then develop a plan to implement any

required improvements. Consider a patient of the practice who has recently had a stroke, perform an analysis of the event (a critical incident analysis) then consider any required changes to minimise the chance of recurrence of a similar incident.

#### Domain 5 - Organisational and legal dimensions

ICPC code: K89, K90, A98

The National Stroke Foundation supports an educational campaign encouraging early presentation of potential stroke patients to hospital. It uses 'FAST' to prompt the community (F = facial weakness, A = arm weakness, **S** = speech difficulty, **T** = time to act). How does this interface with your practice policies and information?

\* Suggested learning activity: review practice protocols regarding triage and appointments for presentations of potentially time critical illnesses. Produce a revision of the protocols as indicated by the outcome of your review.