

Stroke Smart Medical Practice Initiative: Quick Guide

Spot a Stroke – Stop a Stroke – Save a Life

Tragically, one in three stroke patients first call their medical provider instead of 911 to request an office appointment because they do not recognize the medical emergency.¹ This unnecessary delay can result in death or a lifetime disability for the patient. The **Stroke Smart Medical Practice** initiative aims to educate the public and medical office staff to recognize stroke signs and encourage calling 911. Through adopting five (5) actions, medical practices can save lives and reduce disability from strokes.

1. Train all office staff to spot strokes and follow practice protocol. [A 30-minute video is available.](#)
2. Provide Stroke Smart educational materials to all patients. [Free materials are available from VDH.](#)
3. Identify high risk patients and provide individualized Stroke Smart education.
4. Incorporate a Stroke Smart script in voicemail and instruct calling 9-1-1. [Here is a sample script.](#)
5. Measure Stroke Smart impact at the practice level.

1. Train office staff.

- ❖ Educate **all staff**, especially those who answer phones, on stroke signs and the practice protocol to use when stroke is suspected in a patient. *Note: A [30-minute video is available](#) to train staff.*
- ❖ Display a Stroke Smart poster at the front desk as a work aid to help identify patient stroke signs.
- ❖ Ensure any new front office staff are trained in stroke signs and office protocol after they join.

2. Provide Stroke Smart education to patients. [Materials are available on the VDH website.](#)

- ❖ Display Stroke Smart wallet cards and magnets (English and Spanish) at the front desk, in waiting rooms, and/or in exam rooms for patients to readily access. Distribute them at check-in/out.
- ❖ Provide a handout to patients describing the Stroke Smart initiative, stroke signs and actions, and encourage them to ask their nurse if they would like more information.
- ❖ Display Stroke Smart poster(s) in elevators, restrooms, and other public spaces.
- ❖ Loop a Stroke Smart video in waiting areas, on telemedicine holds, or link to it using a QR code.

3. Identify high risk patients and provide individualized Stroke Smart education.

- ❖ Identify patients at high risk for stroke and have health care staff give them a Stroke Smart wallet card and magnet along with a simple verbal explanation of the signs.
- ❖ Tools such as the American Stroke Association [Stroke Risk Assessment](#), or an EHR system “flag” are tools to identify people at high risk.
- ❖ Encourage patients to take materials to give to family, coworkers, and friends.

4. Incorporate Stroke Smart into the voicemail system. [A sample script is available.](#)

- ❖ Incorporate stroke information into the daytime and after-hours office voicemail system.
- ❖ Loop information about stroke signs and actions into announcements for people who are on hold.

5. Measure Stroke Smart impact at the practice level.

- ❖ Identify metrics to assess effectiveness of the Stroke Smart initiative at the practice level.
- ❖ Possible metrics include # of magnets/wallet cards distributed to patients, % of staff trained, # of calls where stroke is spotted and action taken, # of video views, etc.

Find more Stroke Smart resources on the Virginia Department of Health website:

www.vdh.virginia.gov (keywords: Stroke Smart)

¹ Reasons for Prehospital Delay in Acute Ischemic Stroke Joachim Fladt, MD, et. al, Journal of the American Heart Association, October 2019; <https://www.ahajournals.org/doi/10.1161/JAHA.119.013101> v03.2026