

Case Study: Multi-Touch Stroke Care

Patient: Man with history of atrial fibrillation on oral anticoagulation therapy

Presentation: Patient arrived at outside hospital with aphasia, field cut and weakness. He was last known well at 4:15 a.m. and his symptoms were discovered at approximately 4:30 a.m.

Diagnosis: A local CT scan showed a dense left middle cerebral artery, an indicator of ischemic stroke. The referring physician made a direct call to UVA stroke team physician on call, **Prachi Mehndiratta, MD**, who conferred with interventional neuroradiologists **Paul Schmidt, MD**, and **Avery Evans, MD**. Together, they determined that mechanical thrombectomy could be considered for this patient.

Transport: The patient was transported by air to UVA. **Sara Sutherland, MD**, pre-notified the Acute Stroke Intervention Team of the patient's impending air arrival. All team members were in place upon the patient's arrival at 8:23 a.m.

Evaluation: **Clarke Haley, MD**, with resident **Halley Briglia, MD**, ran the acute stroke code and proceeded with evaluation with Interventional Neuroradiology for potential clot retrieval.

Treatment: Anesthesiologist **Danja S. Groves** intubated the patient. Interventional neuroradiologists **Avery Evans, MD**, and **Christopher Durst, MD**, performed the thrombectomy with successful revascularization in two of three M2 branches of the middle cerebral artery. Full reperfusion occurred at 10:15 a.m.

Recovery: Post-procedure, the patient was taken to the Neuro ICU where **Bhiken Naik, MD**, **Bridget Moss, NP**, and a team of respiratory therapists helped him overcome respiratory issues. After 24 hours, he was transferred to the inpatient Stroke Unit under the care of neurologist **Brad Worrall, MD**, intern **Julia O. Baltz, MD**, as well as Mehndiratta and Briglia, who confirmed that atrial fibrillation was the patient's only mechanism for stroke, adjusted medications to better control his hypertension and high cholesterol and restarted oral anticoagulation. Inpatient nurse manager **Heather Turner, RN**, coordinated the patient's care.

Discharge: The patient was discharged three days after admission to Acute Inpatient Rehab where **Patsy Donnelly** was his case manager. He was treated by speech therapist **Renee Bricker**; occupational therapist **Alexander Wilson** and physical therapist **Sarah Costa**. The patient continued outpatient therapy at Augusta Health.

Follow-Up: The patient saw neurologists **Matthew Ehrlich, MD**, and **Clarke Haley, MD** for a two-month follow-up. He has made an excellent recovery. Patient and family report that he is back to his pre-stroke baseline.