Competency for Physician Stroke Education

1. The most common type of stroke is:
   a. Hemorrhagic Stroke
   b. Ischemic Stroke
   c. Cryptogenic Stroke
   d. Cardioembolic Stroke

2. The F.A.S.T. acronym is assessing the:
   a. Anterior circulation
   b. Posterior circulation

3. All stroke alerts should have neurology consult:
   a. True
   b. False

4. Order sets should be used for all stroke/TIA patient admissions:
   a. True
   b. False

5. A patient admitted for a confirmed stroke that occurred >12 hours prior to arrival would need what type of order set?
   a. Stroke/TIA admission post alteplase administration
   b. Alteplase administration- stroke
   c. Stroke/TIA admission without alteplase administration
   d. Stroke acute evaluation

6. Documented dysphagia screening should be done for all patients admitted with stroke symptoms prior to:
   a. CT scan
   b. Neurology consult
   c. Lab testing
   d. Any oral intake

7. Rehabilitation screening should be addressed for all stroke patients to include:
   a. Speech and Language Pathology
b. Occupational Therapy
c. Physical Therapy
d. All of the above

8. Order sets should be used for all stroke and TIA admissions because:
   a. It has everything that you need to fulfill the performance measures.
   b. It is a stand-alone admission set.
   c. It is designed to make your life easier, not harder, and to provide the best care possible to patients based on clinical practice guidelines.
   d. All of the above

9. Stroke mimics can include all but:
   a. Bell’s Palsy
   b. Lower extremity edema
   c. High or low blood sugar
   d. Migraines

10. Telemedicine (Telestroke) is available for stroke alerts:
    a. Monday through Friday 8-4
    b. Weekends only
    c. 24/7
    d. When a neurologist is not currently available