



# YOUR STROKE DISCHARGE CHECKLIST



**Together**  
to End Stroke™

Leaving the hospital after your stroke can be scary and overwhelming. To help you prepare for what's next in your recovery, hospital staff will speak with you and the person helping to care for you about what you can expect. Use the checklist below to help guide your conversations and to make sure your questions are answered.

### INSTRUCTIONS:

1. You and the loved ones helping you should talk with your medical staff throughout your stay about the questions below.
2. Check the questions that you have asked and have gotten answers for, skip any that aren't applicable. Make sure you fully understand the answer before checking the box.
3. Write down the answers to your questions and any important information (e.g., names, phone numbers, etc.) in the spaces that follow.
4. Bring the checklist home and make copies for friends and family who may help you with your post-stroke care.

### UNDERSTAND WHAT HAPPENED

What was the diagnosis?

What caused the stroke?

Patient's Name: \_\_\_\_\_

**WHAT'S NEXT?**

Am I at risk for another stroke? If so, what can I do to reduce that risk?

What can I expect in terms of my recovery and rehabilitation?

What physical, emotional, behavioral and communication challenges can I expect? How should I address these challenges?

What do you suggest in regards to diet and exercise?

- Are any follow-up appointments, tests or rehabilitation needed? If so, will you help me complete the Appointment Tracker below?

**Appointment Tracker:**

<i>Appointment</i>	<i>Date/Time</i>	<i>Physician/Professional's Name</i>	<i>Phone Number</i>

**LIVING ARRANGEMENTS**

- What living arrangement do you recommend?

- If I can go home, how should I be transferred from the hospital?

- What safety precautions should we take to prepare the home?

What tasks will I need help with? Can you show my caregiver how to do the tasks that require special skills?

If you can't answer these questions yet, who will I talk to who can help answer them?

**MEDICATIONS**

What medications do I need to take, what are they for and how often do I need to take them? Can you help me complete the medicine tracker below?

**Medicine Tracker:**

<i>Name of Medicine</i>	<i>What is it for?</i>	<i>How Often &amp; What Time</i>	<i>Instructions</i>	<i>Prescribing Doctor</i>	<i>Pharmacy Phone No.</i>

Patient's Name: \_\_\_\_\_

What kind of equipment and supplies will I need? What are they used for and how do I order them?

How can I determine what my insurance will cover and how much I will have to pay? Do you know of possible ways to get help with these costs?

**FURTHER INFORMATION & HELPFUL RESOURCES**

Is a caregiver or stroke support group available in my community?

What other resources are available?

- What are the names and phone numbers of the physicians, nurses, social worker, etc.?

Name:_____	Phone:_____
Specialty:_____	
Name:_____	Phone:_____
Specialty:_____	
Name:_____	Phone:_____
Specialty:_____	
Name:_____	Phone:_____
Specialty:_____	
Name:_____	Phone:_____
Specialty:_____	

*Additional Notes:*

Patient's Name:\_\_\_\_\_

**StrokeAssociation.org**  
**1-888-4-STROKE**

