New Stroke VTE Safety Recommendations Provide Four Key Steps to Better Health Outcomes

New Stroke VTE Safety Recommendations were recently released by the Physician-Patient Alliance for Health & Safety. These Recommendations were put together with a group of renowned health experts.

Chicago, IL (PRWEB) April 30, 2015 -- At the recent International Stroke Conference (ISC), health experts recommended shortened door-to-treatment times and the use of intermittent pneumatic compression (IPC) to help prevent deep vein thrombosis (DVT) and pulmonary embolism (PE) in stroke patients.

Presenting at the conference were:
* Mark J. Alberts, MD (Clinical Vice-Chair for Department of Neurology and Neurotherapeutics, UT Southwestern Medical Center)
* Laurie Paletz, BSN, PHN, RN-BC (Stroke Program Coordinator, Cedars-Sinai Medical Center)
* Michael Wong, JD, Executive Director, Physician-Patient Alliance for Health & Safety

In a recent editorial for Vascular Disease Management, these health advocates described the new Stroke VTE Safety Recommendations, which they say will provide four key steps to better health outcomes:

“New Stroke VTE Safety Recommendations provide 4 key steps to help prevent deep vein thrombosis (DVT) and pulmonary embolism (PE) in stroke patients. Deep vein thrombosis (DVT) and pulmonary embolism (PE) are common peristroke complications. DVTs are found in 40% to 80% of stroke patients, and PEs are present in 10% to 15% of all stroke patients, with PEs accounting for 13% to 25% of early deaths after a stroke. Below we discuss these 4 steps from the new Stroke VTE Safety Recommendations and encourage all clinicians to assess and treat stroke patients for venous thromboembolism (VTE) …

“Assessing and treating stroke should be done in as short a period of time as possible. Successful health outcomes in stroke patients often depend on having as short a door to treatment time as possible. Delays in evaluation and initiation of therapy should be avoided, because the opportunity for improvement is greater with earlier treatment. This means not only having a collaborative team effort, but also looking at anything that might shorten door-to-treatment times, including designated parking for stroke patients. Unfortunately, the provision of needed prophylaxis has been suboptimal.

“The new Stroke VTE Safety Recommendations, developed by a group of leading neurological health and patient safety experts brought together by the Physician-Patient Alliance for Health & Safety, provide a concise and standardized application of the latest research and best practices. We encourage clinicians to avail themselves of this free resource.

About Physician-Patient Alliance for Health & Safety

Physician-Patient Alliance for Health & Safety is a non-profit 501(c)(3) whose mission is to promote safer clinical practices and standards for patients through collaboration among healthcare experts, professionals, scientific researchers, and others, in order to improve health care delivery. For more information, please go to www.ppahs.org
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