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A prospective evaluation of efficacy of a Nurse-led TIA clinic in Hong Kong

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Introduction

Patients with transient ischemic attacks (TIAs) are at risk of developing ischemic stroke and therefore early management is of paramount importance. An alternative to the conventional physician-led assessment is nurse-led TIA clinic which can provide rapid access to evaluation and diagnostic investigations of TIA

Objectives

To evaluate the efficacy of nurse-led TIA clinic in cardiovascular risk factors control and prevention of ischemic stroke

Methodology

A prospective study was conducted in a nurse-led TIA clinic in the United Christian Hospital of Hong Kong between January and December 2013. The sources of referral included emergency room, medical wards and outpatient clinics. TIA patients were first screened by stroke nurse upon receiving the referrals, and then protocol-driven investigations and treatment were initiated quickly before further assessment by stroke physician. The efficacy endpoints were measured by healthcare utilization, changes in biomedical parameters, lifestyle modification and patients' satisfaction score at 3 months.

Result

A total of 399 patients were referred to stroke nurse for screening. After initial triage, 200 patients were recruited and managed first in the nurse-led TIA clinic. 184 patients were diagnosed to be TIA after review by stroke physician. At 3 months (n=99), there were 6 patients hospitalized for non-vascular events, 2 patients for minor stroke. The 3-month mortality was 0%. For biomedical parameters, there were significant reduction in mean total cholesterol (p<0.001), mean low-density lipoprotein (p<0.001), mean systolic and diastolic blood pressure (p<0.001) and mean fasting glucose (p=0.028). 5 (24%) smokers out of 21 active smokers ceased smoking. There was no change in the mean BMI. The mean patients' satisfaction score was 9.1 out of 10 (range 8 to 10) Conclusion Nurse-led TIA clinic is efficient in triaging TIA referrals and providing early access to initial evaluation and diagnostic workup. Combined with

physician's treatment, TIA patients can achieve significant improvement in cardiovascular risk factors control and low incidence rate of ischemic stroke at 3 months. Our TIA patients are satisfied with this modality of assessment pathway and this can serve as a model of care for future TIA services