

Stroke Rehabilitation

A stroke occurs when blood flow to part of the brain is blocked or reduced.

A transient ischemic attack (TIA), sometimes called a “mini-stroke,” is temporary neurologic symptoms because of reduced blood flow to the brain.

It is very important to catch and treat stroke and mini-stroke as early as possible.

Risk Factors



Some factors and behaviors may increase your risk for stroke. Some of these cannot be modified like age, family history, sex, race, and ethnicity.

Risk Factors listed here may be modified and lowered with treatment or changes in your behavior and lifestyle, or both.

- Alcohol use
- Diabetes mellitus
- Heart problems
- High blood pressure
- High cholesterol
- Illicit substances
- Obesity
- Physical inactivity
- Sleep problems
- Smoking

Know the Symptoms

Common symptoms you may experience with stroke or TIA are listed below. One or more of these symptoms can occur and can range from mild to severe.

- B** Sudden loss of balance or dizziness
- E** Acute changes to the eyes or vision
- F** Facial drooping
- A** Arm or leg weakness
- S** Changes in speech
- T** Time to call 911 emergency services for immediate transport to the hospital



Rehabilitation GOALS

Rehabilitation after stroke helps you recover confidence and function. The personalized goals focus on reducing the negative impact stroke could have on your physical and mental health.

- Improve your physical function
- Improve communication and language skills
- Improve social function
- Improve quality of life
- Improve emotional function (mood and satisfaction with life)
- Improve attention, memory, and problem solving
- Maintain a healthy lifestyle
- Gain understanding of the nature of your stroke
- Self-care: quit smoking; manage high blood pressure, blood sugar, and/or cholesterol, improve diet; improve fitness level



Treatment Plans

Treatment programs are tailored to your goals and abilities. There are many rehabilitation services available after a stroke.

- Physiatrist to manage the rehabilitation team
- Physical therapy
- Occupational therapy
- Speech therapy
- Behavioral and mental health treatment
- Social work or nurse case managers
- Nurses
- Primary care providers and neurologists
- Additional services may include dietetics, recreation therapy, optometry/visual rehabilitation, ophthalmology, clinical pharmacy, vocational rehabilitation, and driver rehabilitation.

For more information on the VA/DoD Clinical Practice Guideline for the Management of Management of Stroke Rehabilitation, visit <https://www.healthquality.va.gov/guidelines/rehab/stroke>

