

Title:

Tissue Plasminogen Activator Non-Treatment in First-Time Ischemic Stroke

Will E. Brewer

University of Alabama at Birmingham, Florence, AL, USA

Session Title:

Rising Stars of Nursing Invited Posters - Group 2

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 10:00 AM-10:30 AM

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 11:45 AM-1:00 PM

Slot (superslotted):

RSG STR 2: Friday, September 26, 2014: 3:00 PM-3:30 PM

Keywords:

Ischemic Stroke and Tissue Plasminogen Activator

References:

American Heart Association. (2012). Impact of Stroke: Stroke Statistics. Retrieved from: www.heart.org.
 Bandura, A. (1971). Social Learning Theory. New York: General Learning Press. Bunch, M.E., Nunziato, E.C., Labovitz, D.L. (2012). Barriers to the Use of Intravenous Tissue Plasminogen Activator for In-Hospital Strokes. *Journal of Stroke and Cerebrovascular Disease*, 21(8). 808-811. doi: 10.1016/j.jstrokecerebrovasdis.2011.04.012
 Creswell, J. W. (2013). *Qualitative Inquiry & Research Design: Choosing among five approaches*. 3rd ed. Los Angeles: Sage Publishing. Chatterjee, P., Cucchiara, B. L., Lazarciuc, N., Shofer, F. S., & Pines, J. M. (2011). Emergency department crowding and time to care in patients with acute stroke. *Stroke*, 42(4), 1074-1080. doi: 10.1161/STROKEAHA.110.586610.
 Davidson, F.W. (Producer), & Davidson, J.M. (Director). (2003). *Bandura's Social Cognitive Theory: An Introduction* [Motion Picture]. United States: Davidson Films.
 Johnson, M., & Bakas, T. (2010). A review of barriers to thrombolytic therapy: Implications for nursing care in the emergency department. *Journal of Neuroscience Nursing*, 42(2), 88-94. Retrieved from: www.scopus.com
 LaMonte, M. P., Bahouth, M. N., Magder, L. S., Alcorta, R. L., Bass, R. R., Browne, B. J., . . . Gaasch, W. R. (2009). A regional system of stroke care provides thrombolytic outcomes comparable with the NINDS stroke trial. *Annals of Emergency Medicine*, 54(3), 319- 327. doi: 10.1016/j.annemergmed.2008.09.022
 National Institute of Health. (2013). The National Institute of Neurological Disorders and Stroke. Retrieved from: <http://www.ninds.nih.gov/index.htm>
 Prabhakaran, S., O'Neill, K., Stein-Spencer, L., Walter, J., & Alberts, M. J. (2013). Prehospital triage to primary stroke centers and rate of stroke thrombolysis. *JAMA Neurology*, 70(9), 1126-1132. doi: 10.1001/jamaneurol.2013.293

Learning Activity:

| LEARNING OBJECTIVES | EXPANDED CONTENT OUTLINE | TIME ALLOTTED | FACULTY/SPEAKER | TEACHING/LEARNING METHOD | EVALUATION/FEEDBACK |
|---------------------|--------------------------|---------------|-----------------|--------------------------|---------------------|
| Example | Example | Example | Example | Example | Example |

| | | | | | |
|---|--|-------------------|----------------------------------|---|--|
| <p>Critique selected definition of the term, "curriculum"</p> | <p>Definitions of "curriculum" Course of study Arrangements of instructional materials The subject matter that is taught Cultural "training" Planned engagement of learners</p> | <p>20 minutes</p> | <p>Name, Credentials</p> | <p>Lecture PowerPoint presentation Participant feedback</p> | <p>Group discussion: What does cultural training mean to you?</p> |
| <p>The learner will be able to identify that acute ischemic strokes are a significant problem in America.</p> | <p>The learners will engage with presenter during poster session.</p> | <p>5 minutes</p> | <p>Will Brewer, MSN, RN, CEN</p> | <p>Poster Presentation</p> | <p>Group/Individual discussion of ischemic stroke incidence.</p> |
| <p>The learner will be able to identify at least 2 reasons why</p> | <p>The learner will collaborate with presenter during</p> | <p>5 minutes</p> | <p>Will Brewer, MSN, RN, CEN</p> | <p>Poster Presentation</p> | <p>Group/Individual discussion of possible reasons that Tissue Plasminogen Activator may be underutilized in ischemic stroke management.</p> |

| | | | | | | |
|---|-----------------|--|--|--|--|--|
| Tissue Plasminogen Activator could possibly be underutilized in ischemic stroke management. | poster session. | | | | | |
|---|-----------------|--|--|--|--|--|

Abstract Text:

Purpose/Background: Strokes are a significant problem in America; as about every 40 seconds someone experiences a stroke. Eighty-seven percent of all cerebrovascular events are ischemic in origin and could possibly be treated with tissue plasminogen activator (tPA). However, whether at a stroke certified organization or a small community hospital, tPA's use is extremely conservative. Since its inception, the use of tPA has been controversial among cerebrovascular and emergency clinicians. However, it remains the most timely and conventional treatment for acute ischemic stroke. The purpose of this proposed qualitative research study is to evaluate physicians' attitudes toward tPA and how their attitudes negate its use in first-time ischemic stroke treatment.

Research Questions: (a) What are physicians' attitudes toward tPA usage in first time ischemic stroke? (b) How do physicians describe their comfort level in prescribing tPA in a first-time stroke victim? (c) Does the unfamiliarity/non-use of tPA among physicians lead them to apply a non-credible exclusion criteria to the decision process?

Sample/Methodology: Descriptive phenomenology will be utilized to examine why physicians underutilize tPA as a treatment modality for first-time ischemic stroke. The lived experiences of the physicians are incredibly valuable in this proposed research study. The sample for this proposed study will include emergency department physicians from various medical centers in Alabama. Focused interviews will be employed to collect research information.

Theoretical Framework: Dr. Albert Bandura's social cognitive theory will guide the research study. In Bandura's theory, he described human beings as adaptive learners. The model is based upon three areas: cognitive/personal, behavioral, and environmental. These three domains compose the triadic reciprocal causation and states that each area is interchangeable. Essentially, Bandura found that humans learn behavior by watching and learning from others. Have physician's learned negative behaviors about tPA from their mentors and continue to use them in their own practice? One of the strongest driving forces is behavior. Just one adverse outcome from tPA can haunt the clinician and negate its use for years to come.