# Must-Know Vocabulary

## FOR WORKING WITH STROKE PATIENTS

- Aneurysm: Localized enlargement of an artery due to weakened arterial wall. A ruptured aneurysm can cause a stroke.
- Aphasia: Challenges with communication due to left side brain damage.
- Apraxia: Difficulty performing movements on command.
  Individual can understand the command, but are unable to carry it out.

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- Atherosclerosis: Hardening and narrowing of arteries.
- Impairments occurring on opposite side from where lesion occured.

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- Cerebrovascular Accident (CVA):
  Medical term for stroke.
- **Dysarthria:** Slurred speech as a result of muscular weakness or poor coordination
- **Dysphagia:** Swallowing disorder often associated with strokes.
- **Embolus:** Blood clot that travels to the brain.

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- Flaccidity: Term used to describe muscle tone. Limp or lacking firmness.
- Hemiparesis: Weakness on one side of the body.

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- Hemiplegia: Total or partial paralysis of one side of the body.
- Hemorrhage stroke: Occurs when a blood vessel in the brain ruptures. Most critical type of stroke.
- Hyperlipidema: High cholesterol
- Hypertension: High blood pressure
- **Ipsilateral symptoms:** Symptoms occuring on same side as where the lesion occured.
- a blood vessel in brain develops a clot and deprives brain of oxygen.

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Single side neglect: Impaired awareness on one side of the body.

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Spasticity: Increased stiffness and tightness in muscles, preventing normal movement patterns. The muscle remains contracted and presents with resistance while passive stretching occurs.

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- **Thrombus:** Blood clot that forms in blood vessel of brain.
- Tissue Plasminogen activator (tPA): Medication that can dismantle blockage within an artery. Must be administered within 4.5 hours of first stroke symptoms.

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Transient Ischemic Attack
(TIA): "Mini Stroke". TIA
occurs when blood supply is
temporarily cut off to brain.
Typically less than a few
minutes.