**Stroke – s/p r-TPA**

**EQ-5D Scores**

* **On Admission:** (Mobility: 4, Self-Care: 4, Usual Activities: 5, Pain/Discomfort: 2, Anxiety/Depression: 2)
* **Before Discharge:** (Mobility: 3, Self-Care: 3, Usual Activities: 4, Pain/Discomfort: 2, Anxiety/Depression: 4)

**Issues & Progress**

1. **Ischemic stroke s/p r-TPA**
   * Received r-TPA following an acute ischemic stroke. No major post-treatment complications.
   * Initially presented with dense right-sided weakness and significant difficulty ambulating.
   * Gradual motor recovery noted with physiotherapy and occupational therapy.
   * Mild residual speech difficulties but improving with therapy.
2. **Persistent Functional Deficits & Dependence in ADLs**
   * On admission, required full assistance for transfers, dressing, and toileting.
   * Now able to walk short distances with a walking aid but still requires supervision.
   * Able to perform some self-care activities with effort but struggles with dressing and grooming on the affected side.
   * Rehabilitation ongoing to improve coordination and strength.
3. **Reduced Participation in Daily & Vocational Activities**
   * Initially unable to perform any usual activities due to severe weakness.
   * Now able to engage in light tasks but continues to struggle with fine motor activities, limiting ability to resume work and household responsibilities.
   * Fatigue and reduced endurance remain key barriers to independence.
   * Rehabilitation goals set to facilitate return to previous levels of function where possible.
4. **Post-Stroke Adjustment Disorder with Depressive and Anxiety Symptoms**
   * Expressed significant distress over sudden loss of independence and persistent functional limitations.
   * Severe anxiety noted, particularly regarding risk of recurrence, long-term disability, and impact on quality of life.
   * Ongoing emotional distress with reports of low mood, decreased motivation for rehabilitation, and difficulty coping with changes in function.
   * Referred to Psychiatry for further evaluation and management.
   * Sertraline 25mg once daily initiated for mood and anxiety symptoms.
   * Continued psychological support planned, with follow-up to assess response to treatment and need for further interventions.