

Stroke Education Toolkit



WASHINGTON STATE DEPARTMENT OF HEALTH
WA COVERDELL ACUTE STROKE PROGRAM



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INTRODUCTION

The purpose of the Stroke Education Toolkit is to have stroke education resources in one easy to find place for use during National Stroke Awareness Month (May) and throughout the year to educate patients, the public, and staff about stroke. Intended users are staff at healthcare facilities and services, emergency medical services, and community services. The emphasis is on acute stroke but some information about risk factors and prevention is included. It is not intended to include every stroke education resource available.

Thanks go to Valerie Lyttle, RN, MSN, CEN, CNRN, SCRN, Stroke Program Coordinator, MultiCare Good Samaritan Hospital, for the original Toolkit produced in 2012. Additionally, we would like to thank the American Heart Association/American Stroke Association, the CDC Division for Heart Disease and Stroke Prevention, Million Hearts, the National Stroke Association, the National Institutes of Health, and the Health Promotion and Communication Section of the Office of the Assistant Secretary at the Washington State Department of Health for the resources that are included in this toolkit.

This update is provided by the WA State Department of Health, WA Coverdell Acute Stroke Program.

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KEY FACTS AND MESSAGES

- **Stroke is a “brain attack”**
Stroke is often called a “brain attack” because it affects the arteries leading to and within the brain. A stroke happens when an artery that carries oxygen and nutrients to the brain is either blocked by a clot or ruptures. When that happens, part of the brain cannot get the blood and oxygen it needs and starts to die.
- **Ischemic stroke**, about 80 percent of all strokes, is caused by a severe blockage of blood to part of the brain. Most commonly, blood flow through an artery is blocked by atherosclerosis (narrowed arteries).
- **Hemorrhagic stroke** occurs when arteries leak or rupture, causing bleeding into or around the brain.
- Every 40 seconds someone has a stroke.
- Stroke is the leading cause of serious long-term disability in adults.
- Be a Stroke Hero: Learn the signs and symptoms of stroke and call 9-1-1 immediately if you think you or someone you’re with is having a stroke.
- **Signs of stroke**
 - Sudden numbness or weakness of the face, arm or leg, especially on one side of the body.
 - Sudden confusion, trouble speaking or understanding.
 - Sudden trouble seeing in one or both eyes.
 - Sudden trouble walking, dizziness, loss of balance or coordination.
 - Sudden severe headache with no known cause.
- If you see even one of these signs, call 9-1-1 immediately! Minutes matter!
- Time is brain – there is a short period of time after the symptoms start, when serious damage can be prevented. Rehabilitation after a stroke helps people overcome disabilities that result from damage to the brain.
- Think F.A.S.T for the most common signs and symptoms of stroke, and call 9-1-1 immediately if you or someone you’re with has signs of a stroke

FACE Ask the person to smile. Does one side of the face droop?

- ARMS** Ask the person to raise both arms. Does one arm drift downward or not move?
- SPEECH** Ask the person to repeat a simple sentence. Is speech slurred or hard to understand? Are they unable to speak?
- TIME** Time to call 911 if you see any one of these signs. Note the time symptoms started, or when the person was last known to be normal and tell the medics.

- The faster stroke is treated, the more likely the patient will recover. Patients who are treated within 90 minutes of their first symptoms are almost three times more likely to recover with little or no disability.
- Calling 911 at the first sign of stroke is critical. Our state’s system is activated the moment you call. Emergency medical service responders are specially trained on stroke assessment and they alert the hospital in advance so stroke patients get seen and treated faster.
- A stroke can happen to anyone, at any time and at any age. Learn to recognize a stroke, because in a stroke emergency, time lost is brain lost. For every minute you don’t get help, more brain cells die.
- [High blood pressure](#) is the leading cause of stroke and the most important controllable risk factor for stroke.
- 80% of strokes are preventable.
- You can [reduce your risk](#) of stroke by addressing these modifiable risk factors:
 - High blood pressure
 - Overweight
 - Cigarette smoking
 - High cholesterol
 - Diabetes
 - Physically inactive
 - Poor diet
- Many people in Washington die or are disabled from stroke because they do not get lifesaving treatment in time. The sooner you’re treated, the better your chances of recovery and getting back to your normal activities. Calling 9-1-1 when you or someone else is experiencing stroke symptoms activates the Washington State Emergency Cardiac and Stroke System. The system is designed to get you to the right place, in time for the right treatments. To learn more about Washington’s Emergency Cardiac and Stroke System, visit www.doh.wa.gov/ecs.

- People who experience stroke benefit from rehabilitation services. Rehabilitation helps improve function and quality of life.

BRAIN HEALTH MESSAGES

The following messages are provided by the Washington State Department of Health's Healthy Aging Initiatives program. If you have any questions about them, please contact Marci Getz, Director: Marci.Getz@doh.wa.gov.

- Heart disease and high blood pressure can damage your brain's health.
- Get your blood pressure checked regularly. Work with your health care professional to control your blood pressure and protect your brain health.
- Keep your blood pressure under control for a healthier body and brain.
- Dementia and stroke are more likely to affect people with high blood pressure. Don't take unnecessary risks. Keep your blood pressure under control.
- Risk factors for heart disease – including diabetes – can negatively affect your brain health.
- Take care of both your heart and brain. Eat a healthy diet, control your weight, and exercise regularly.
- Exercise is not only good for your body, it's also good for your brain. Get regular exercise that makes your heart beat faster, which increases blood flow to the brain and body.
- Physical activity can help build your brain health by lowering risk factors such as high blood pressure, diabetes and high cholesterol.
- It's never too late to start exercising for better health for your brain and body.

STATISTICS

National Statistics

*Source: Heart Disease and Stroke Statistics- 2019 Update
A Report from the American Heart Association*

- Someone in the US has a stroke every 40 seconds on average.
- In 2016, stroke accounted for about 1 of every 19 deaths in the US.
- On average in 2016, someone died of stroke every 3 minutes 42 seconds.
- When considered separately from other cardiovascular diseases, stroke ranks No. 5 among all causes of death in the US, killing approximately 142,000 people a year.
- In 2016, the age-adjusted stroke death rate was 37.3 per 100,000, a decrease of 16.7% from 2006, whereas the actual number of stroke deaths increased 3.7% during the same time period.
- Each year, about 795,000 people experience a new or recurrent stroke. Approximately 610,000 of these are first attacks, and 185,000 are recurrent attacks.
- According to data from 2005, stroke was a leading cause of serious long-term disability in the US. Approximately 3% of males and 2% of females reported that they were disabled because of stroke.
- Projections show that by 2030, an additional 3.4 million US adults aged 18 and older, representing 3.9% of the adult population, will have had a stroke, a 20.5% increase in prevalence from 2012. The highest increase (29%) is projected to be in white Hispanic males.
- Between 2015 and 2035, total direct medical stroke-related costs are projected to more than double, from \$36.7 billion to \$94.3 billion, with much of the projected increase in costs arising from those ≥80 years of age.
- In 2016, global prevalence of cerebrovascular disease was 80.1 million, whereas that of ischemic stroke was 67.6 million and that of hemorrhagic stroke was 15.3 million.

[AHA National Heart and Stroke Statistics](#)

[Heart Disease and Stroke Statistics-2019 At-a-Glance](#)

Washington State Statistics

Source: WA State Department of Health

- Stroke is the 6th leading cause of death in Washington, with over 3,000 dying from stroke in 2017 (about 8 deaths per day), and the leading cause of preventable disability for adults.
- Black and American Indian/Alaskan Native populations in Washington are more likely to die from stroke than whites.
- The rate of death from stroke is higher in areas with higher poverty levels.
- There were over 17,656 hospitalizations for stroke in 2017.
- Hospital charges for stroke in 2017 were nearly \$1.2 billion, an average of \$66,000 per stroke.
- About 10% of all ischemic stroke patients get t-PA. This includes patients who are not eligible for t-PA because they arrive too late or have other contra-indications.
- On average, stroke patients who arrive by EMS are assessed and treated faster at the hospital than those who arrive in a private vehicle.
- The number of people experiencing strokes is expected to increase as baby boomers age, putting them at increased risk of premature death and disability from stroke, and trends show more strokes in people under 55 years of age.
- More than a quarter of Washingtonians are living with obesity, hypertension or high cholesterol, major risk factors for stroke.

RESOURCES FOR PATIENT AND COMMUNITY EDUCATION

The following websites contain brochures, flyers, banners, tweets, infographics and other useful tools.

American Heart Association/American Stroke Association:

- [Stroke Month Campaign](#)
- [American Stroke Association Stroke Resource Library](#)
- One simple dual purpose flyer [Life's Simple Seven to Prevent a Stroke](#) (page 1; FAST messaging on page 2)

National Stroke Association [Stroke Awareness Resources](#)

- The National Stroke Association is folding in to the American Stroke Association. Resources found on this site may not be up to date.

Centers for Disease Control:

- [Stroke Communications Kit](#), including social media messages, shareable graphics, videos and additional resources
- [Stroke Patient Education Handouts](#)

National Institutes of Health [Downloadable posters, toolkits](#) for order (including Spanish)

Million Hearts [Education Tools](#)

Heart Disease, Stroke, and Diabetes Prevention Order Form – Blood pressure trackers, brochures, posters, and other materials can be requested from DOH, free of charge. Most are available in multiple languages (Chinese, English, Spanish, and Vietnamese). [To view the order form, click here.](#)

Pediatric Stroke Warriors [Materials available upon request](#) for pediatric stroke awareness

OverReact2Stroke Campaign:

- [Information for patients and caregivers](#), including 10 signs and symptoms of stroke, stroke facts, handouts, posters and brochures.
- [Information for healthcare professionals](#), including journal ads, billboards, magnets, wall posters, a news release template, and other resources. There are also public service announcements and videos available for download.

SOCIAL MEDIA MESSAGING

TWITTER

- If you think you're having a stroke, call 911 FIRST and FAST. [911 Warning Signs](#) #StrokeMonth
- May is American Stroke Month. Every 40 seconds someone has a stroke. Learn the warning signs and call 911. [Signs of Stroke](#) #StrokeMonth
- Saving a life starts with you. Think F.A.S.T. to identify the stroke warning signs. [Signs of Stroke](#) #StrokeMonth
- Before you get in your car or call a friend, call 911 FIRST and FAST if you suspect a stroke. [Signs of Stroke](#) #StrokeMonth
- Suspect a stroke? Don't wait! Fast care is a matter of life and death. Call 911 FIRST and FAST! [Signs of Stroke](#) #StrokeMonth
- Care starts immediately with Washington's Emergency Cardiac & Stroke System. Call 911 FIRST and FAST! [911 Warning Signs](#) #StrokeMonth
- Recognizing the signs and symptoms of a #stroke F.A.S.T. can help save lives. Here's how. <http://bit.ly/208s3wk> @CDCHeart_Stroke
- Emergency services determine if it's a stroke, start immediate care, and get you to a medical facility. Call 911 FIRST and FAST! [Signs of Stroke](#) #StrokeMonth
- Up to 80% of strokes are preventable. Reduce #stroke deaths in your community with prevention and treatment strategies from @CDCgov. <http://bit.ly/2vUKTA4> @CDCHeart_Stroke
- Every 40 seconds, someone in the U.S. has a #stroke. Be prepared: learn the signs & symptoms. <http://bit.ly/208s3wk> #StrokeMonth
- #Stroke is preventable & treatable. This #StrokeMonth, take action to lower your risk for stroke. <http://bit.ly/2hSXBY9>
- #Stroke can happen to anyone at any time. Learn about your risk and ways to control it. <http://bit.ly/2lfcE9z> #StrokeMonth

- Every 3 minutes and 45 seconds, someone dies of #stroke. Learn how you can prevent a stroke or lower your chances of having one. <http://bit.ly/2hSXB9>
- Know the facts about #stroke. Visit @CDCgov for info on #stroke, risk factors, and treatment. <http://1.usa.gov/1Hwea3C> #StrokeMonth
- A #stroke can happen at any age, at any time – just ask these 10 stroke survivors. Read their stories. <http://bit.ly/2HVJJej>
- DYK #women have unique #stroke risk factors from men? Here are 5 risk factors women should know to protect their brain health. <http://bit.ly/2a71Gp9>
- Not all #women are equally affected by #stroke; #AfricanAmerican women are 2x as likely to have a stroke as white women. Try these 4 lifestyle changes to lower your risk. <http://bit.ly/2HgW4bo>
- About 3 out of 10 #Hispanic women have high #BloodPressure, a major #stroke risk factor. Download this factsheet to learn how the ABCs of heart health can help lower your risk. <http://bit.ly/2oJOpY3>
- Learn how the @CDCgov Coverdell Program works to improve access and care for #stroke patients nationwide. <http://bit.ly/2ovTdlh>
- Health systems and health care professionals can prevent #stroke by addressing risk factors and improving patient outcomes when stroke occurs. <http://bit.ly/2vUKTA4>
@CDCHeart_Stroke

FACEBOOK

- Stroke is a leading cause of death and disability nationwide and around the world – but it doesn't have to be. Learn how you can treat and prevent stroke with tools from CDC [tag]. <http://bit.ly/2oJOWle>
- On average, one American dies from a stroke every 3 minutes 45 seconds. But there is good news: Up to 80% of strokes are preventable. Take action to lower your risk for stroke with these resources from CDC [tag]. #StrokeMonth <http://bit.ly/2myMHTT>
- Time lost is brain lost. Every minute counts when you or someone you know is having a stroke. Act F.A.S.T. and call 9-1-1 right away if you think someone might be having a stroke. #StrokeMonth <http://bit.ly/2oQE283>

- Did you know that some stroke symptoms in women may be different from those in men? Here are 5 risk factors women should know to protect their brain health. <http://bit.ly/2a71Gp9>
- Not all women are equally affected by #stroke; African American women are 2x as likely to have a stroke as white women. Try these 4 lifestyle changes to lower your risk. <http://bit.ly/2HgW4bo>
- About 3 out of 10 Hispanic women have high blood pressure, a major stroke risk factor. Download this factsheet to learn how the ABCs of heart health can help lower your risk. <http://bit.ly/2oJOpY3>
- Can you spot the warning signs of a stroke? Take this quiz to find out. #StrokeMonth <http://bit.ly/2pw66gA>
- A stroke can happen at any age, at any time – just ask these 10 survivors. Read their stories about how stroke changed their lives. <http://bit.ly/2HVJJej>
- From the very first symptoms of stroke to recovery at home, here’s how the CDC [tag] Coverdell Program connects health care professionals across the system of care to save lives and improve care. <http://bit.ly/2nLzZlI>
- After decades of declining rates of stroke deaths, progress in preventing stroke deaths in the U.S. has slowed. The good news? YOU have the power to make a difference. Explore stroke data and prevention strategies for health systems, health professionals, and state health departments. <http://bit.ly/2vUKTA4>

SHAREABLE GRAPHICS AND ANIMATIONS

The following animations are provided by [Million Hearts](#). Feel free to use them in your social media messages and check out their library of [shareable graphics](#).



[What Happens in the Ambulance During a Stroke?](#)



[A Stroke Can Happen at Any Age](#)



[Preventing Stroke Deaths](#)

VIDEOS

GENERAL STROKE EDUCATION

- Pediatric Stroke Warriors: Stroke Recognition in Children of All Ages
<https://www.youtube.com/watch?v=gcfKq9AqTmA>
- CDC Preventing Stroke Deaths: Vital Signs/September 2017
<https://youtu.be/HbmZBcf9k6s>
- Stroke Heroes Act FAST: For Younger Children
<https://www.youtube.com/watch?v=bgpkOxRNzDc>
- CDC: Recognize the Signs and Symptoms of Stroke
<https://www.youtube.com/watch?v=mkpbbWZvYmw>
- HealthSketch: What is a Stroke? Animated Explanation Video
<https://www.youtube.com/watch?v=rylGnzodxDs>
- Additional Stroke Videos from the CDC
<https://www.cdc.gov/stroke/media/videos.htm>
- American Heart Association: Treat Stroke F.A.S.T.
<https://www.youtube.com/watch?v=q5XHH1XfAbM>
- American Heart Association: Stroke Simulation: Know the signs. Call 911 quickly.
<https://www.youtube.com/watch?v=yt1Mv-UFLNk>
- American Heart Association: F.A.S.T. Song
<https://www.youtube.com/watch?v=lTykAih-USY>

AFRICAN AMERICAN POPULATIONS

- AHA F.A.S.T. Song – Stroke Signs: Featuring Dee-1 & Tha Hip Hop Doc
<https://www.youtube.com/watch?v=oyzwsdd4AE>

- CDC: Prince Quire’s Stroke Story
<https://www.youtube.com/watch?v=J8U5v5wOn-o>
- CDC: Tips from Former Smokers: Blanche’s Story
<https://www.youtube.com/watch?v=P6TFRFiu6Ug>
- National Stroke Association: Faces of Stroke Ambassadors: Pamela and Diana
<https://www.youtube.com/watch?v=RLDB4GmwRaA&feature=youtu.be>

AMERICAN INDIAN/ALASKA NATIVE POPULATIONS

- CDC: ACT FAST: 1-2-3! Youth of the Anishnawbe Nation Learn About Stroke
<https://youtu.be/nbiWfhXyqEU>
- National Heart, Lung, and Blood Institute: Your Heart, Your Drum: Strengthening the Heartbeat of American Indians and Native Alaskans
<https://www.youtube.com/watch?v=w-j4ZiMZZTg>

SPANISH SPEAKING POPULATIONS

- National Institute of Neurological Disorders and Stroke: Ataque cerebral: Conozca los síntomas y actué a tiempo
<https://stroke.nih.gov/materials/video.htm>
- National Stroke Association: Las minorías y los ataques cerebrovasculares
<https://www.youtube.com/watch?v=wUYc8EDnx-U>
- Ictus (dibujos animados)
<https://www.youtube.com/watch?v=Tb078TioCFc>

PUBLIC SERVICE ANNOUNCEMENTS

- National Institute of Neurological Disorders and Stroke: Radio PSAs in English and Spanish
<https://stroke.nih.gov/materials/radio.htm>
- National Stroke Association: 1 Minute Radio Announcement in Spanish
<http://www.stroke.org/stroke-resources/resource-library/anuncio-radio-1-minuto>
- National Stroke Association: 30 Second Radio Announcement in Spanish
<http://www.stroke.org/stroke-resources/resource-library/anuncio-radio-30-segundas>

PRINTED MATERIALS

AFRICAN AMERICAN POPULATIONS

- AHA/ASA: Power to End Stroke: A Guide to Help African Americans Fight Stroke
https://www.empoweredtoserve.org/wp-content/uploads/2015/06/PTES_Guide_to_Fight_Stroke.pdf
- Hip Hop Public Health: Hip Hop Stroke
<http://www.hiphopstroke.org/>
- AHA/ASA: EmPOWERED To Serve: Stroke
http://www.empoweredtoserve.org/wp-content/uploads/2016/05/ETS_Stroke.pdf
- AHA/ASA: EmPOWERED To Serve: Power Sunday Toolkit
http://www.empoweredtoserve.org/wp-content/uploads/2016/05/ETS_Toolkit_v2.2.pdf
- CDC: African-American Women and Stroke Factsheet
https://www.cdc.gov/stroke/docs/aa_women_stroke_factsheet.pdf
- CDC: African-American Men and Stroke Factsheet
https://www.cdc.gov/stroke/docs/aa_men_stroke_factsheet.pdf

AMERICAN INDIAN/ALASKA NATIVE POPULATIONS

- U.S. Department of Health and Human Services: Honoring the Gift of Heart Health. A Heart Health Educator's Manual for Alaska Natives
https://www.nhlbi.nih.gov/files/docs/resources/heart/ak_manual.pdf
- Indian Health Services: Heart Health
<https://www.ihs.gov/forpatients/healthtopics/hearthealth/>

SPANISH SPEAKING POPULATIONS

- Massachusetts Health Promotion Clearing House. This website contains posters, brochures, fact sheets and other materials available in Spanish, as well as Portuguese, Khmer, Haitian Creole and English.
<https://massclearinghouse.ehs.state.ma.us/category/HDSP.html>
- National Institute of Neurological Disorders and Stroke: Spanish Toolkit. This toolkit contains a video, brochures and a flipchart, and is available for \$35.
<https://stroke.nih.gov/materials/spanish-stroke-toolkit.htm>
- AHA/ASA: EmPOWERED To Serve: Shareable Facebook Posts, Spanish
<http://www.empoweredtoserve.org/index.php/power-to-end-stroke/american-stroke-month-2017/american-stroke-month-messaging-spanish/>
- AHA/ASA: Recursos en Español (Resources in Spanish)
http://www.strokeassociation.org/STROKEORG/Professionals/Stroke-Spanish-Resource-Page-16_UCM_491255_SubHomePage.jsp
- CDC: Las Mujeres Hispánicas y Los Accidentes Cerebrovasculares (Hispanic Women and Stroke)
<https://www.cdc.gov/stroke/docs/fs-hispanics-stroke-women-sp.pdf>
- CDC: Los Hombres Hispánicos y Los Accidentes Cerebrovasculares (Hispanic Men and Stroke)
<https://www.cdc.gov/stroke/docs/fs-hispanics-stroke-men-sp.pdf>
- CDC: Las Personas Hispánicas y Los Accidentes Cerebrovasculares (Hispanic Populations and Stroke)
<https://www.cdc.gov/stroke/docs/fs-hispanics-stroke-sp.pdf>
- National Stroke Association: El accidente cerebrovascular y la presión arterial alta (Stroke and high blood pressure)
http://support.stroke.org/site/DocServer/NSAFactSheet_HighBloodPressure_2012_Spanish.pdf?docID=10084
- National Stroke Association: El colesterol y el accidente cerebrovascular (Cholesterol and Stroke)
http://support.stroke.org/site/DocServer/NSAFactSheet_Cholesterol_2012_Spanish.pdf?docID=10083
- National Stroke Association: Fibrilación auricular y accidente cerebrovascular (ACV) (Atrial fibrillation and stroke)

http://support.stroke.org/site/DocServer/NSAFactSheet_Afib_2013_Spanish.pdf?docID=10081

- National Stroke Association: Como reducir el riesgo y reconocer los síntomas (How to reduce risk and recognize the symptoms)
http://support.stroke.org/site/DocServer/NSAFactSheet_ReducingRisk_2012_Spanish.pdf?docID=10085
- National Stroke Association: Viva en un entorno libre de humo: Datos sobre el tabaquismo y el riesgo de desarrollar un ACV (Live in a smoke-free environment: Facts about smoking and the risk of stroke)
http://support.stroke.org/site/DocServer/NSAFactSheet_BeSmokeFree_2012_Spanish.pdf?docID=10082
- National Stroke Association: Explicación del accidente cerebrovascular (ACV) 101 (Explaining Stroke 101)
<http://www.stroke.org/stroke-resources/resource-library/explicaci%C3%B3n-del-accidente-cerebrovascular-acv-101>
- National Institute of Neurological Disorders and Stroke: Lo Que Necesita Saber Sobre Los Ataques Cerebrales (What You Need to Know About Stroke)
https://stroke.nih.gov/documents/KnowStroke_SpanishBrochure_08_V32.pdf

INTERVIEW GUIDE

The following interview guide can be used when interviewing a stroke survivor in your community.

Preparing for the interview and publishing the article

1. Identify a stroke survivor to interview.
2. When contacting the interviewee to obtain consent for the interview:
 - Introduce yourself.
 - Describe the purpose of the interview.
 - Explain that you have a few questions prepared and offer to show them the questions ahead of time.
 - Reassure them that their participation is entirely optional.
 - Answer any questions that they might have about the use of their name and, if applicable, photograph.
 - Make sure that they understand where the interview will be posted and the implications of that exposure (how many members of the public may see their name or photo).
3. Submit the interview for inclusion in an upcoming agency newsletter, bulletin, or on social media.

Suggested Interview Questions

1. Tell us a little about yourself
2. When did you experience the stroke and how did you know that you were having a stroke?
3. What happened next? What steps did you take to get help?
4. What treatment did you receive at the hospital and what was your rehabilitation process like?
5. What steps do you take now to prevent stroke?
6. What advice would you give to someone who has recently experienced a stroke?

7. What message do you have for the general public about stroke and stroke prevention?

Suggested Article Structure and Text

I. Introduction

Every 40 seconds, someone in the United States has a stroke. Strokes are a leading cause of disability in the United States, but did you know that there are steps that you can take to reduce the impact of stroke and improve stroke recovery? With stroke, it is critical to think **FAST!** F-Face drooping; A-Arm weakness; S-Speech difficulty; T-Time to call 9-1-1. If you, or someone around you, is showing these signs of stroke, do not hesitate and call 9-1-1 right away. By doing so, you are giving yourself or another individual the best chance of minimizing the long-term effects of stroke.

Here at [*your agency name*], we would like to take this opportunity to highlight the story of a stroke survivor-an individual who has thrived after stroke. We took some time to get to know [*name of interviewee*], who shares with us [*his/her*] story of resilience.

II. Interview

III. Conclusion

Remember - stroke can happen to anyone at any time. Knowing the warning signs of stroke and calling 9-1-1 immediately can make you a stroke hero-both for yourself and others in your community.

SAMPLE PRESS RELEASES

SAMPLE PRESS RELEASE 1

FOR IMMEDIATE RELEASE

Date

MEDIA CONTACT:

Name

Phone

Email

Think and act F.A.S.T. in case of a stroke

Strokes kill more than 2,700 Washington residents each year. Others survive, but with significant, costly disabilities. That's why it's important to think and act F.A.S.T. when someone near you displays stroke symptoms.

What does F.A.S.T. mean? It's an acronym for a simple way to determine whether a person might be having a stroke:

- | | |
|---------------|---|
| <i>Face</i> | Ask the person to smile. Does one side of the face droop? |
| <i>Arms</i> | Ask the person to raise both arms. Does one arm drift downward or not move? |
| <i>Speech</i> | Ask the person to repeat a simple sentence. Is speech slurred or hard to understand? Are they unable to speak? |
| <i>Time</i> | Time to call 911 if you see any one of these signs. Note the time symptoms started, or when the person was last known to be normal and tell the medics or hospital staff. |

The signs and symptoms of a stroke include:

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body.
- Sudden confusion, trouble speaking or understanding.
- Sudden trouble seeing in one or both eyes.

- Sudden trouble walking, dizziness, loss of balance or coordination.
- Sudden, severe headache with no known cause.

Acting fast is crucial. Many people experiencing stroke die or are disabled because they don't get the appropriate medical treatment in time. For stroke, that means within three hours, or in some situations up to six hours. The sooner people are treated, the higher the chances they'll recover and return to normal activities. Activating Washington's [Emergency Cardiac and Stroke System by calling 9-1-1](#) speeds treatment, but fewer than half of stroke patients use 9-1-1 to get to the hospital. Patients arriving by ambulance get treated faster in part because medics call ahead so the hospital is ready for the patient when they arrive.

"Calling 9-1-1 is essential," said State Health Officer Dr. Kathy Lofy. "Friends and family members may have good intentions when they take people with stroke symptoms to the hospital, but it's much better to get emergency medical personnel on the scene as soon as possible. Lost time often leads to a worse outcome."

The Washington State Department of Health participates in the [Paul Coverdell National Acute Stroke Program](#). This initiative builds on the improvements achieved through the Emergency Cardiac and Stroke System, and will further improve stroke care and outcomes.

Stroke is the fifth leading cause of death nationwide, and the sixth leading cause in Washington. It is also a leading cause of severe, long-term disability. The number of strokes is projected to increase by 20.5 percent between 2016 and 2030, and the direct medical costs for treating stroke are expected to almost triple, from \$71.6 billion to \$184.1 billion by 2030, according to the American Stroke Association, a division of the American Heart Association.

May is Stroke Awareness Month, with a focus on improving the number of stroke patients who receive lifesaving treatment in time. Stroke Awareness Month is the American Stroke Association's and the National Stroke Association's call to increase awareness of stroke, and to inspire citizens to learn about the signs of stroke and how to react.

FOR IMMEDIATE RELEASE

Date

MEDIA CONTACT:

Name

Phone

Email

May is American Stroke Month – think and act F.A.S.T. in case of a stroke

CITY, WA — Washington Governor [name] has proclaimed May as "Stroke Awareness Month" as part of a statewide call to increase awareness of stroke warning signs and improving the number of stroke patients that receive lifesaving treatment in time.

Many people in Washington die or are disabled from stroke because they do not get the appropriate medical treatment within the recommended time window, which is three hours for the most common type of stroke. Increasing the number of stroke patients who get timely treatment is one of the goals of Washington’s Emergency Cardiac and Stroke System. To activate the system, citizens must be more vigilant about recognizing the stroke warning signs and immediately calling 9-1-1 when they or someone else is experiencing stroke symptoms.

Stroke is the fourth leading cause of death nationwide and a leading cause of severe, long-term disability, according to the American Stroke Association. “Stroke is a life-threatening medical emergency. For every minute you don’t get help, more brain cells die, increasing the likelihood of permanent disability or even death. The best way to get medical treatment quickly is to call 9-1-1,” said SPOKESPERSON NAME, TITLE.

An easy way to recognize stroke is to think F.A.S.T.:

- FACE** Ask the person to smile. Does one side of the face droop?
- ARMS** Ask the person to raise both arms. Does one arm drift downward or not move?
- SPEECH** Ask the person to repeat a simple sentence. Is speech slurred or hard to understand? Are they unable to speak?
- TIME** Time to call 911 if you see any one of these signs. Note the time symptoms started, or when the person was last known to be normal and tell the medics.

Face droop, Arm weakness, and Speech difficulty are the most common signs and symptoms of stroke. Additional signs and symptoms are sudden numbness or weakness of the face, arm or leg, especially on one side of the body; sudden confusion or trouble understanding; sudden trouble seeing in one or both eyes; sudden trouble walking, dizziness, loss of balance or coordination; and sudden severe headache with no known cause.

Washington has changed the way emergency medical services (EMS) respond to cardiac and stroke patients. With the new Washington State Emergency Cardiac and Stroke System, modeled after the state's trauma system, standard guidelines for EMS call for patients to be taken directly to a hospital that can provide specialized care. If there isn't one close by, patients will be rapidly assessed by the local hospital and transferred immediately to the treating hospital. The public can help by learning heart attack and stroke symptoms and calling 9-1-1 immediately when they or someone else is experiencing these symptoms.

Stroke Awareness Month is the American Stroke Association's and the National Stroke Association's call to increase awareness of stroke and to inspire citizens to learn about the signs of stroke and how to prevent a stroke. To learn more about Washington's Emergency Cardiac and Stroke System, visit www.doh.wa.gov/ecs.

Emily Welbourn, stroke survivor and business development director for the American Heart Association/American Stroke Association in Tacoma. /Courtesy photo

OPINION

JULY 03, 2016 2:09 PM Tacoma News Tribune

Having a stroke wasn't her finish line By Emily Welbourn

I was certain I'd been stabbed above my right eyebrow.

While running a 3.5-mile race in May 2013, I felt a sudden, piercing pain in my forehead at precisely the one-mile marker. I was 27 years old, in the best shape of my life, and had trained for this race for months. I couldn't stop now. I squeezed my eyes shut to cope with the pain.

One foot in front of the other. By the time I crossed the finish line, my left hand no longer worked to open a water bottle. I fell while trying to stretch. Bystanders at the finish line noticed that one side of my face was drooping and took me to the medical tent in a wheelchair.

Fortunately, a physician was there to examine me and I'll never forget his instant diagnosis: "Emily, you are having a stroke."

At my age, no one ever expects to hear those words. But I barely had a moment to process them. All of a sudden I was being rushed to the hospital in an ambulance. Thanks to American Stroke Association guidelines, the hospital team was ready for me when I arrived.

Immediately a CT scan was performed, which confirmed an ischemic stroke, caused by a blood clot on the right side of my brain. Already a small portion of my brain tissue had died.

Looking back I am extremely grateful that bystanders at the finish line recognized my symptoms as something serious and that I got to the hospital quickly. When it comes to stroke, time is brain. Nearly two million brain cells die for every second that a stroke goes untreated.

Luckily for my type of stroke, there is a drug called tPA that can eliminate a clot and reverse the effects of a stroke, but it must be administered within a 3- to 4-hour window. I received tPA with one hour to spare.

In Washington, we have the Emergency Cardiac and Stroke System of Care. It is designed to speed up care and save lives. Calling 911 triggers the system – operators are trained to identify stroke and dispatch an ambulance, first responders notify the hospital while the patient is in transport, and the hospital stroke team is ready to diagnose and treat the patient upon arrival.

Washington stroke patients are receiving treatment faster: 48 minutes from the time they arrive at the hospital until the administration of tPA, according to the American Stroke Association, compared to 75 minutes in 2011 when the system went into effect. The goal was 60 minutes or less.

I can tell you that recovering from a stroke is challenging. It took many months of physical and occupational therapy to regain strength on my left side. I had to re-learn how to add and subtract. But today I am running again and even finished the Boston Marathon in April 2015.

I know not all stroke patients are as fortunate, but you can make a big difference. Know the warning signs of a stroke. Think F.A.S.T – F for face drooping; A for arm weakness; S for speech difficulty; and T for time to call 911.

Time is the number one factor in reducing the likelihood of death or disability from stroke. By knowing the warning signs and dialing 911, you can give someone the opportunity to thrive after a stroke and not just survive.

Emily Welbourn works as business development director for the American Heart Association/American Stroke Association in Tacoma. She previously was a volunteer with the organization.

Read more here: <http://www.thenewstribune.com/opinion/article87057202.html#storylink=cpy>

EXAMPLES OF PUBLIC AND EMPLOYEE EDUCATION ACTIVITIES FOR STROKE MONTH

- Play stroke videos in strategic locations (see section above with links to videos)
- Staff in-services
- Educate through employee wellness programs like SmarthHealth and give points
- Do FAST awareness education to hospital valet, housekeeping, transport, and food service teams
- Post FAST/blood pressure/Life's Simple Seven posters in exam rooms, waiting rooms, bathrooms, by drinking fountains, on fridges
- Stickers on the café's plan java jackets
- Printed java jackets
- Give out FAST bags and have a table at farmers markets
- Get FAST on school digital boards
- Neuroanatomy class for non-neuro nurses with edible teaching aids (body part gummies include brains, Oriental Trading; Google gummy brains; there are even life-size gummy brains, and chocolate and jello molds)
- Daily internet messages on hospitals website
- Tweets and retweets
- Facebook messages, Facebook live events – interview EMS, stroke coordinators, neurologists, etc.
- Infographics
- Health fairs
- Table tents in cafeterias
- Ambulance wraps
- Messaging on buses
- Media outreach
- Physician talk
- Get interview or PSAs on local radio
- Info tables, blood pressure checks at health fairs
- Presentation/handouts/blood pressure checks at the local senior center on S/S of a stroke, prevention, and general stroke information
- FAST flyers in hospital/other billing statements
- Hospitals and hospital systems often have thousands of employees so even internal promotion can reach a wide audience
- Collaborate with local public health
- Work with area [agencies on aging](#) to reach the senior population through their vast network
- EMS councils and regions who have a role in prevention and education, although no dedicated resources for cardiac and stroke education

COMMUNITY EDUCATION MATERIALS AVAILABLE THROUGH DOH

The following materials are available upon request from the WA Coverdell Stroke Program:

- FAST refrigerator magnet
- FAST reusable bag
- FAST pen with retractable banner featuring FAST symptoms and prevention information
- File of Life refrigerator magnet. This magnet includes a paper insert which should be kept up to date with medical information and emergency contacts.

To request materials, please contact Kseniya Efremova: kseniya.efremova@doh.wa.gov.



HEART DISEASE, STROKE, AND DIABETES PREVENTION ORDER FORM



Heart Disease, Stroke, and Diabetes Prevention Order Form

August 2017 345-352

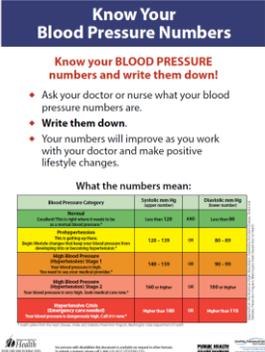
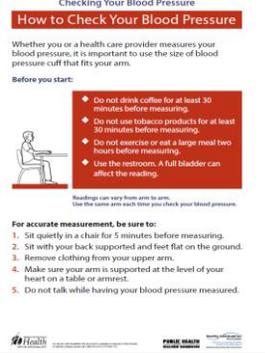
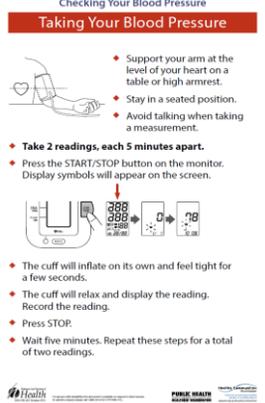
To order materials, email this form to Marissa Floyd at Marissa.Floyd@doh.wa.gov or mail it to: **Washington State Department of Health, ATTN: Marissa Floyd (PPE), 310 Israel Road SE, Tumwater WA 98501.**

Call 360-236-3677 if you have questions or need assistance filling out the form.

For persons with disabilities, this document is available on request in other formats. To submit a request, please call 1-800-525-0127 (TDD/TTY 711).

Pub #	Description	Size	# of Laminated	# of Non-Laminated	Picture	Language & Quantity
345-274	Blood Pressure Tracker: This pocket-sized publication is for individuals to track blood pressure readings.	8.5x5.5 card (Print on 8.5x11 paper, then fold.)	N/A		Blood Pressure Tracker 	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____ <input type="checkbox"/> Korean _____
345-273	How to Check Your Blood Pressure: This publication describes the steps for someone to take their own blood pressure. The manual includes a tear-out wallet card to track blood pressure readings.	8.5x5.5 booklet	N/A		How to check your Blood Pressure 	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____ <input type="checkbox"/> Korean _____

340-272	<p>What is Blood Pressure?: This publication will be available for patients in health clinics. It outlines the importance of improving your blood pressure and the risks associated with having high blood pressure. The publication also includes questions to ask your medical provider, ideas for making healthy lifestyle changes and online resources.</p>	8.5x11 brochure	N/A			<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____ <input type="checkbox"/> Korean _____															
340-268 (Front) 340-269 (Back)	<p>Know Your Blood Pressure Numbers: This poster, designed to be used in a health clinic setting, gives information about blood pressure numbers and why it is important to keep track of blood pressure.</p>	<input type="checkbox"/> 8.5x11 (Front & back)	N/A		<p>FRONT:</p> <p>Know Your Blood Pressure Numbers</p> <p>Know your BLOOD PRESSURE numbers and write them down!</p> <ul style="list-style-type: none"> Ask your doctor or nurse what your blood pressure numbers are. Write them down. Your numbers will improve as you work with your doctor and make positive lifestyle changes. <p>What the numbers mean:</p> <table border="1" data-bbox="1249 958 1423 1055"> <thead> <tr> <th>Blood Pressure</th> <th>What it means</th> <th>What to do</th> </tr> </thead> <tbody> <tr> <td>Normal</td> <td>Less than 120/80 mm Hg</td> <td>Keep it up!</td> </tr> <tr> <td>Elevated</td> <td>120-129/80-89 mm Hg</td> <td>Check it more often</td> </tr> <tr> <td>High Blood Pressure (Hypertension) Stage 1</td> <td>130-139/80-89 mm Hg</td> <td>Check it more often and make lifestyle changes</td> </tr> <tr> <td>High Blood Pressure (Hypertension) Stage 2</td> <td>140 or higher/90 or higher mm Hg</td> <td>Check it more often and take medicine</td> </tr> </tbody> </table> <p>BACK:</p> <p>Checking Your Blood Pressure</p> <p>How to Check Your Blood Pressure</p> <p>Whether you or a health care provider measures your blood pressure, it is important to use the size of blood pressure cuff that fits your arm.</p> <p>Before you start:</p> <ul style="list-style-type: none"> Do not drink coffee for at least 30 minutes before measuring. Do not use tobacco products for at least 30 minutes before measuring. Do not exercise or eat a large meal two hours before measuring. Use the restroom. A full bladder can affect the reading. <p>For accurate measurement, be sure to:</p> <ol style="list-style-type: none"> Sit quietly in a chair for 5 minutes before measuring. Sit with your back supported and feet flat on the ground. Remove clothing from your upper arm. Make sure your arm is supported at the level of your heart on a table or armrest. Do not talk while having your blood pressure measured. 	Blood Pressure	What it means	What to do	Normal	Less than 120/80 mm Hg	Keep it up!	Elevated	120-129/80-89 mm Hg	Check it more often	High Blood Pressure (Hypertension) Stage 1	130-139/80-89 mm Hg	Check it more often and make lifestyle changes	High Blood Pressure (Hypertension) Stage 2	140 or higher/90 or higher mm Hg	Check it more often and take medicine	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____
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340-268	<p>Know Your Blood Pressure Numbers: This poster, designed to be used in a health clinic setting, gives information about blood pressure numbers and why it is important to keep track of blood pressure.</p>	<input type="checkbox"/> 11x17 (Front only)			 <p>Know Your Blood Pressure Numbers</p> <p>Know your BLOOD PRESSURE numbers and write them down!</p> <ul style="list-style-type: none"> Ask your doctor or nurse what your blood pressure numbers are. Write them down. Your numbers will improve as you work with your doctor and make positive lifestyle changes. <p>What the numbers mean:</p> <table border="1"> <thead> <tr> <th>Blood Pressure Category</th> <th>Normal Blood Pressure (less than 120/80 mm Hg)</th> <th>Elevated Blood Pressure (120-139/80-89 mm Hg)</th> <th>High Blood Pressure (140-159/90-99 mm Hg)</th> <th>High Blood Pressure (160-179/100-109 mm Hg)</th> <th>Stage 2 High Blood Pressure (180 or higher/110 or higher)</th> </tr> </thead> <tbody> <tr> <td>Normal Blood Pressure</td> <td>Less than 120 and less than 80</td> <td>120-139 and 80-89</td> <td>140-159 and 90-99</td> <td>160-179 and 100-109</td> <td>180 or higher and 110 or higher</td> </tr> </tbody> </table>	Blood Pressure Category	Normal Blood Pressure (less than 120/80 mm Hg)	Elevated Blood Pressure (120-139/80-89 mm Hg)	High Blood Pressure (140-159/90-99 mm Hg)	High Blood Pressure (160-179/100-109 mm Hg)	Stage 2 High Blood Pressure (180 or higher/110 or higher)	Normal Blood Pressure	Less than 120 and less than 80	120-139 and 80-89	140-159 and 90-99	160-179 and 100-109	180 or higher and 110 or higher	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____
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340-269	<p>Checking Your Blood Pressure: How to Check Your Blood Pressure: This poster shows the steps to take for accurate measurement of your blood pressure and is designed to be used by health care providers.</p>	<input type="checkbox"/> 11x17 (Front only)			 <p>Checking Your Blood Pressure</p> <p>How to Check Your Blood Pressure</p> <p>Whether you or a health care provider measures your blood pressure, it is important to use the size of blood pressure cuff that fits your arm.</p> <p>Before you start:</p> <ul style="list-style-type: none"> Do not drink coffee for at least 30 minutes before measuring. Do not use tobacco products for at least 30 minutes before measuring. Do not exercise or eat a large meal two hours before measuring. Use the restroom. A full bladder can affect the reading. <p>Readings can vary from arm to arm. Use the same arm each time you check your blood pressure.</p> <p>For accurate measurement, be sure to:</p> <ol style="list-style-type: none"> Sit quietly in a chair for 5 minutes before measuring. Sit with your back supported and feet flat on the ground. Remove clothing from your upper arm. Make sure your arm is supported at the level of your heart on a table or armrest. Do not talk while having your blood pressure measured. 	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____												
340-267	<p>Checking Your Blood Pressure: Taking Your Blood Pressure Poster: This poster shows how to take your blood pressure and is designed to be used by health care providers.</p>	<input type="checkbox"/> 11x17 (Front only)			 <p>Checking Your Blood Pressure</p> <p>Taking Your Blood Pressure</p> <ul style="list-style-type: none"> Support your arm at the level of your heart on a table or high armrest. Stay in a seated position. Avoid talking when taking a measurement. <p>Take 2 readings, each 5 minutes apart.</p> <ul style="list-style-type: none"> Press the START/STOP button on the monitor. Display symbols will appear on the screen. <p>The cuff will inflate on its own and feel tight for a few seconds.</p> <ul style="list-style-type: none"> The cuff will relax and display the reading. Record the reading. Press STOP. Wait five minutes. Repeat these steps for a total of two readings. 	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____												

345-288	<p>What's the Big Deal About Controlling My Blood Pressure?: This poster, designed to be used in a health clinic setting, gives suggestions for making lifestyle changes that can lower blood pressure</p>	<input type="checkbox"/> 11x17 (Front only)			 <p>What's the BIG DEAL about controlling my blood pressure?</p> <p>Small changes make a HUGE difference:</p> <p>Even one lifestyle change (make for my health...)</p> <ul style="list-style-type: none"> Walking 30 minutes, five days a week — can decrease blood pressure 10 points Losing 5-10 lbs. of weight — can decrease blood pressure 5 points Quitting tobacco (call 1-800-QUITNOW) — can decrease blood pressure 5-10 points Limiting sodium (salt) to 1,500 mg per day — can decrease blood pressure 2-8 points <p>can decrease my blood pressure by small amounts</p> <p>and small decreases in blood pressure result in huge health benefits.</p> <p>Every 5 points decrease in blood pressure reduces:</p> <ul style="list-style-type: none"> • risk of stroke by 34% • risk of heart attack by 21% <p>Every 2 points decrease in blood pressure reduces:</p> <ul style="list-style-type: none"> • risk of stroke by 8% • risk of heart attack by 5% <p>AMERICAN HEART ASSOCIATION</p>	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____
340-265	<p>Checking Your Blood Pressure: Before You Begin: This poster shows the steps to take for accurate measurement of your blood pressure and is designed to be used by health care providers</p>	<input type="checkbox"/> 11x17 (Front only)			 <p>Checking Your Blood Pressure Before You Begin</p> <ul style="list-style-type: none"> <input type="checkbox"/> No coffee in the last 30 minutes.  <input type="checkbox"/> No tobacco in the last 30 minutes.  <input type="checkbox"/> No meals or exercise within 2 hours.  <input type="checkbox"/> Visit the restroom A full bladder can affect the reading.  <p>AMERICAN HEART ASSOCIATION</p>	<input type="checkbox"/> English _____ <input type="checkbox"/> Spanish _____ <input type="checkbox"/> Chinese _____ <input type="checkbox"/> Vietnamese _____ <input type="checkbox"/> Russian _____

340-346	<p>Diabetes: A Snapshot in Washington Infographic: This infographic has current data, easy to read and follow, showing the impact of Diabetes in Washington state. It also encourages readers to learn more about diabetes risk factors and to follow-up with medical providers. Intended audience is general public.</p>	<input type="checkbox"/> 11x22 (Front only)		<p>The infographic provides a comprehensive overview of diabetes in Washington. Key statistics include: 627,000 people with diabetes (1 in 4 adults), 2 million people with prediabetes (1 out of 3 adults), and a 50% higher risk of death for adults with diabetes. It also details the cost of diabetes at \$14K per year and lists risk factors for Type 2 diabetes such as obesity, inactivity, and family history. The infographic is designed to be easy to read and follow, encouraging readers to learn more and follow up with medical providers.</p>	<input type="checkbox"/> English _____
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Name: _____

Organization: _____

Shipping Address: _____

Email: _____

Phone Number: _____