

Gino Mollica:

Hi, everyone happy Thursday. And welcome to today's webinar, a conversation with Amy Graham. Before we get started, we'd like to just go over a few items so you know how to participate in today's event. The webinar today is being recorded and a link will be sent out within 24 hours after. There are no continuing educations associated with this webinar, but you may access a certificate of completion following in your follow up email. You also have the opportunity to submit questions. Simply just type them into your chat box during any point and during the presentation. We'll collect all of these and address them during our Q&A session at the end.

Gino Mollica:

If you experience any technical difficulties, most can just be resolved by refreshing your browser. If your issue is not resolved in during the refresh, please refer to the go-to webinar troubleshooting customer service email located in your webinar confirmation. To view live close captioning for today's webinar, please utilize the hyperlink in the chat. I'll now pass it over to Jeanie, senior program manager Get With the Guidelines-Stroke.

Jeanie Luciano:

Thanks, Gino. And thank you everyone for joining us today. It is truly my pleasure to have the opportunity to talk with Amy Graham today. I have a disclosure to make, and the disclosure is that I am at baseline a very huge Amy Graham fan. And I had the opportunity to work with her and get to know her when we did some stroke boot camps in the Midwest. So I am a huge Amy Graham fan. I did think that it'd be a big opportunity for our listening audience to hear about her journey over the past year and what she has learned from being over the horrible education of being on the other side of the bed. So what she has learned and what she can share is really valuable for all of us. So Amy, welcome. And I know we're going to talk... I normally would introduce our guests and talk about their background, but we're going to do that in our conversation. So we're going to have Amy talk about herself. So first off, Amy, thank you for joining us today. You look wonderful.

Amy Graham:

Thank you, Jeanie. And I'm just as much as a fan as Jeanie because she's who I want to be when I grow up. She's amazing. I learned everything from her.

Jeanie Luciano:

Oh my goodness. So Amy, I just always think that your background is so interesting. So before we talk about that lovely family that we see on the screen there, can you tell me about your education and your work background and how did you become involved with the AHA and with stroke?

Amy Graham:

So my background is I was a paramedic for years, and then I also worked in... As a paramedic, I was a critical care ICU nurse. I worked in the surgical trauma ICU. And the funny thing, I was never a neuro nurse until my sister had a stroke. Eventually when I was working as a nurse, I decided to go back. I want to be in the hospital and I miss it. And one of my friends talked to me and they say, "Would you like to work in STEMI care?" And I'm like, "Sure." So then that's when I went over to Mission: Lifeline. And I started working with STEMI Systems of Care. And then eventually, I converted. Once my sister had a stroke, I went more full force with stroke system as care with AHA in Kentucky, in the Cincinnati area.

Amy Graham:

As you can see on the side, my family. The boy all the way on the left. That is Connor. He's my oldest. He is now 14 years old. The person in the black shirt, that's my husband, Ted. He's a big fan of the Christmas Story. If you don't know that, it's on 24 hours on Christmas Day. He drives us all crazy with it. And the little redhead next to me, that is my little boy, Anthony. He's in seventh grade. And they've had to weather through the storm with us after my stroke. So they're doing really good.

Amy Graham:

Now, as far as my education, the other background I have besides nursing, I went back to school. I was going to do pre-med and actually organic chemistry kind of ended that for me. But anyway, I went and got my cellular molecular biology degree and I also have a chemistry minor. So I'm a big chemistry and science nerd. That's my thing. That's my big for education. And beside becoming stroke coordinator... Sorry, my puppies might want to try to come into screen. As far as education after nursing, I've always had great doctors I've worked with that have... And I always ask a lot of questions. And as far as education, when I came to AHA, that's when I learned the stroke systems of care and the stroke coordinator role before I took my job that I have now as a stroke coordinator. So I was very lucky to have a lot of good people teach me from AHA and Louisville and Kentucky where I work with the volunteers there.

Jeanie Luciano:

Okay. And currently your role is you're a stroke systems coordinator? Is that...

Amy Graham:

Yes. I am with TriHealth Hospital in Cincinnati, Ohio. And we had one comprehensive stroke survey. We just went through a survey, yay, with Joint Commission. We also had a thrombectomy [inaudible 00:06:15], but that's the north that is in Cincinnati, Ohio. And we have three hospital... Well, we have two hospitals that are going for Acute Stroke Ready, and three that are Acute Stroke Ready, and one that is a primary stroke center.

Jeanie Luciano:

I'm going to put this picture up here.

Amy Graham:

[inaudible 00:06:36] keeps us busy.

Jeanie Luciano:

I'm going to put this picture up here. This just shows you part of Amy's passion. There's a brain cake. I hate to say that's a brain cake. And she's also been quite involved in the Heart Walks. And don't you participate in the Heart Mini? Is that what you call it?

Amy Graham:

Yes. I am very passionate in being a volunteer for the AHA. I love raising money for stroke awareness and the cardio cardiovascular research. So if anybody in your area, please make sure you're doing volunteer with your AHA office in your city. And on the right, you can see this is down at the Lexington Heart Walk. University Kentucky brings their fast letters. And those are my kids in the letters. I wanted

to get their pictures. And that brain cake is... Actually one of the doctors I used to work with when I started in Cincinnati and the stroke system care, he had a Halloween party at his house and he got a cake made [inaudible 00:07:46]-

Jeanie Luciano:

So all these activities that are very, very familiar to the stroke coordinators that are listening in. Right? I just want to forward through here. So there's more pictures of Amy and her boys. So the mom's out there. You know what a hard job that is. But I'm sorry everyone, but Amy is the best as you can see from the star in the middle. She's the best mom ever, and she can do it. So Amy really has her hands full. So Amy, let's talk about your stroke journey. What happened with the surgery, if you could take us back to, I guess it was July 1st of last year.

Amy Graham:

Yeah. So when it happened, I wasn't feeling good. And for some reason I will little shorter breath and my legs were swelling and I didn't understand. And I'm like, "What is going on?" And so finally I told my husband, "I think I need to go to the hospital." So he took me to the ER. And I thought I had a blood clot in my leg or a PE or something. I'm like, "Something's not right." So I went to the hospital and they took a look at me. They did an EKG. And then they ran some labs. At that time, they told me I had an NSTEMI and then I was in heart failure. And I'm like, "I've never had any of those issues with heart failure." I couldn't believe it.

Amy Graham:

So in the ER, when they told me I had an NSTEMI, they took me to the cath lab. The cath lab, I was awake during the procedure. And my cardiologist was letting me look at the image. And I saw my coronary arteries as he was doing my angiogram. And normally, you're supposed to have big, thick coronary arteries for the blood to flow through. Mine was like a little piece of thread. And of course me as a nurse, I said, "What are we talking about percentage occluded? He goes, "Well, we really don't do percentages." I'm like, "What? No?" He goes, "But you need open heart surgery." And I was floored when he told I need to go to open heart.

Amy Graham:

And where I was for my cath lab, after the cath lab, they did a Doppler on my heart, I guess, to look at my ejection fraction. And at the time, they found a blood clot in my left atrium. And they said I was in AFib and I never had a history of AFib. I never knew I was in AFib. And they said in my left atrium, I had a large clot and they didn't know how old it was or how big it was. So they put me on the heparin drip. Then they transferred me to our other hospital that is our cardiac hub, which is where our thrombectomy patients go to. And at that time, a couple days later, they were getting me ready for open heart surgery.

Amy Graham:

So when I went to open heart, we had a plan, they had me on heparin. We would go for the clot. And everybody thought, "Okay, she's going to go have open heart surgery and everything will be okay." Well, once the anesthesia... Before the time they put me under anesthesia, it got me lined up. And then when I was on the operating table and they started my open heart surgery, a piece of the clot broke off and went into my left MCA. They didn't know when it happened during surgery, but they know it happened. I couldn't get tPA because of the surgery.

Amy Graham:

The next day, when they woke me up out of anesthesia, they saw... And you can see that was me. And I was a bad nurse. Once they woke me up, I extubated myself. I pulled the tube out. I also pulled my [inaudible 00:12:07] out. I was a bad... I was that patient because I was a nurse. They woke me up and I was intubated. And I was like, "Oh, heck no." And I didn't know what was going on at the time, but I heard those people talking over me. And when they woke me up and I'm like, "Why do they keep telling me to move my left arm?" And they were doing the NIH Stroke Scale on me. And I'm like, "What is going on?" Then I heard my husband and the doctor said I had a stroke. And then I pulled my ET tube. And one of the doctors was like, "Well, I guess she made a decision. She doesn't need the ventilator." So-

Jeanie Luciano:

Yeah. That was kind of my next question. At what point in time did you realize what was going on?

Amy Graham:

Months.

Jeanie Luciano:

Like, were you aware of what was going on at this point in time in the hospital?

Amy Graham:

Yes and no. I mean, I knew I had a stroke. But being aware, it took couple months. My brain was so cloudy. They had me on Precedex and I think propofol. So my brain was pretty out of it. I didn't really wake up more until I went to rehab. And like, with there, in that picture, I still have my chest tube from my open heart surgery.

Jeanie Luciano:

Wow. I'm going to, again, pass this picture because you are past this picture at this point in time.

Amy Graham:

Thank the Lord. That was horrible. Learning how to walk again was the hardest thing I ever did in rehab because I still had an open chest and I had to get up on the parallel bars. And so once I got up and walking and I didn't need as much help on the parallel bars, it got better.

Jeanie Luciano:

Yeah. So what would you say was kind of the biggest challenges of your recovery?

Amy Graham:

I would say the post-stroke depression was the hardest. I was in a very dark place that I never thought that I could be in. I've never been that bad depressed in my life. But with the help of Zoloft and my family doctor, I'm like a different person now. I'm getting ready to go see a neuropsychologist to see maybe, hopefully, he can help tweak my meds a little bit. But then after that, I've been great ever since. Thank the Lord.

Amy Graham:

I want to tell the nurses that are on the phone, for your stroke patient, it is so important to have them do PT every day. Don't blow them off because I can even say I was bad as a nurse when I was working in the neuro ICU. And when the PT would come in, I was like, "Hey, can you wait a second and let me go in and do something with them real quick?" And then now that I know, I'm like, "Put off what..." Unless it's a lifesaving thing, let PT do because the more repetition you do with your patient and PT with your stroke patient, the better, quicker... They're going to be able to get better a little quicker because it takes a lot of repetition of your PT once you had your stroke.

Jeanie Luciano:

So don't interrupt the therapist when they're trying to work on the patients?

Amy Graham:

Yes.

Jeanie Luciano:

Do you know right now any of our therapy listeners are standing up applauding you? For your comment there.

Amy Graham:

Good. [inaudible 00:15:42]. So PT, OT, speech are so important. Thank you all for everything that you do because without them, I would not be here. My PT is everything. I love my PT people. They really helped me because I still do... After year after my stroke, I still go to PT. And I do all my exercises the way I'm supposed to with my [inaudible 00:16:08].

Jeanie Luciano:

That's a commitment. Amy, you mentioned that your sister had had a stroke. Did you have anything other than clearly a family history? Did you have anything else that was putting you at risk that you were aware of?

Amy Graham:

Oh, yes I did. So you can't tell in this picture. So in that picture I was 250 pounds. I've lost a hundred pounds now. I had high blood pressure, I was diabetic, and I had undiagnosed AFib. I never knew I had AFib and that's what caused the clot to go to my brain. And the thing is, the AFib, it doesn't feel like... Those of you that are nurses, it doesn't feel like what they say. I never felt a flutter in my chest. I never felt a skip beat. Never. And they say sometimes AFib can happen in your sleep. So make sure you're checking and going to your family doctors and getting screened, if not, at least if you can put yourself on a monitor, just check every once in a while. Or if you have an Apple Watch, use the app to where you can look at your EKG. But I didn't smoke or really [inaudible 00:17:21]-

Jeanie Luciano:

Yeah. So let's talk about... So we have a lot of healthcare, several hundred healthcare professionals listening to you right now. What was important to you from the healthcare team other than them letting you get your physical therapy done? If there was a couple takeaways that our stroke coordinators and neuron could hear from you, what would it be?

Amy Graham:

The big thing is PT, OT, and screening your patient for depression. And be proactive because I can tell you as a stroke patient, I think it's not a matter of if a time. It's not if. It's when will the stroke depression start. Educate your family on looking for post-stroke depression and say, "This is something that could happen in the next couple weeks. Be prepared." And educate the family on some of the post-stroke depression that can help. And PT, make sure you're really working with your families because my primary caregiver is my husband. He sits with us with during PT so he can simulate my exercises at home. So he knows what I'm supposed to do, how I'm supposed to do my exercises with my arms. So PT, don't forget about family. You're more important to that primary caregiver than you realize; how important you are to the family. And thank you for what you do. The best thing I can say, family education. And my husband as a caregiver-

Jeanie Luciano:

That's great. Is there anything...

Amy Graham:

Go ahead. You said, "Is there anything?"

Jeanie Luciano:

No. Is there anything that you think people could have done differently for you? I think your comments about post-stroke depression or r really key, especially in a woman as young as you are with a young family and returning to work, that kind of issue. Did it come on you right away or is it something that evolved? You know? We hear that oftentimes people don't have depression in the hospital, but sometimes they have it after. It comes on after the stroke, after they're home or after they're home from rehab.

Amy Graham:

Yeah, it took a couple months after I got home for rehab. Yep.

Jeanie Luciano:

Okay.

Amy Graham:

Oh, the other thing I want to tell. If we have any cardiac nurses, make sure you're doing your stroke neuro evaluation to your person after procedure. Just because you think they might be like... You know? They go for a cath, or they go for some kind tabber even your TCARs, make sure you're doing a neuro exam and checking them. Or [inaudible 00:20:26]-

Jeanie Luciano:

That's a really good point. You were technically one of our dreaded in-hospital strokes, right? Periprocedural strokes.

Amy Graham:

Yes, I was. They found it the day after when I started waking up when they doing my NIH stroke screen and I wasn't moving my left side. And so my husband and a nurse, and then that's when they called the Inpatient Stroke Alert.

Jeanie Luciano:

Wow. Wow. Okay. I had-

Amy Graham:

I was out of the window... Oh, sorry. Go ahead.

Jeanie Luciano:

That's okay. No, you go ahead.

Amy Graham:

I was out of the window for tPA and that is... And I was out of the window for some reason and they couldn't take me for intervention. Well, tPA I couldn't do because of the open heart surgery, but I was out of the window for intervention for endovascular to go get the clot out of my M1.

Jeanie Luciano:

Now, I knew you from before, Amy. And I know you are a quite motivated person and a sort of a super achiever, right?

Amy Graham:

Yes.

Jeanie Luciano:

What motivates you to continue to work on your recovery?

Amy Graham:

It's never done because whatever God left me to have from stroke, I'm going to make the most out of anything, especially the left side for my arm. Whatever my PT do... Even though the doctor said my left arm will never really come back and be like how normal it was, and I'm going to prove them wrong. Dang it. I'm going to do exercise. My arm is not going to be perfect, but I'm going to do the exercises the way my PT tells me to do. I'm going to keep going.

Jeanie Luciano:

Yeah. I think that's an important message that like... [inaudible 00:22:30] you have to keep yourself motivated to keep working hard at it, don't you?

Amy Graham:

Heck yeah because I love mine and I want to get back to the stroke program to help people. That's definitely what I want to do. I want to make a difference.

Jeanie Luciano:

I showed back a few pictures there's... Well, we don't like that picture. Amy also has a passion for dogs. I think she told us she's up to four now.

Amy Graham:

Yeah.

Jeanie Luciano:

So they're her own personal pet therapy there. But-

Amy Graham:

Yes, pets are important. The research have found that pets are important for recovery... Just to let everybody know. I think a while back at IS year one year, AHA had puppies. And they show how it's important in the research how they... For animals. AHA came out with that from research that was funded. That's why it's so important. I tell people, like I said, "We got to do all of our local Heart Minis and CycleNations so we can get that research so we know what's important for other stroke patients and our rehab guidelines and stuff like that. So please get involved. Get your teams together and go do CycleNation and raise funds.

Jeanie Luciano:

I think it's admirable that despite everything that you've gone through, that you still are looking at the bigger picture like the mission that you're familiar with the AHA overall. So I think that's wonderful.

Amy Graham:

Yeah. I really want to work in our stroke system and set care. I'm really lucky because I'm here in Cincinnati. I had a University of Cincinnati in my backyard, so I had some of those doctors checking in on me because nobody could believe I had a stroke. I had Dr. Pooja Khatri. She came to my bedside to check on me, to see how I was doing.

Amy Graham:

Oh, the other thing I forgot about my story. I want to tell you about the doctors I had at my hospital. So my stroke medical director is Dr. Chris Zammit. I've known him since he was a resident in the ER. He was an ER doc, but he's also neurocritical care doc. And he was in Rochester, New York. When he found out that I had a stroke, he drove all the way back from Rochester, New York to Cincinnati for me to help take care of me. He is a great man.

Jeanie Luciano:

It's always good to have that personal connection, isn't it?

Amy Graham:

Yeah. And then when they call... So in our area, the UC stroke team, if a patient has a stroke, we call a stroke team. And they're the one that makes a decision for tPA or no. I also had another doctor that I've known since he was resident, Dr. Jordan Bonomo. He took care of me. He helped the doctors make up a decision how to take care of me from once I had my stroke. And then I had Dr. Jonathan Hodes. He was my neuro interventionalist from the Mayfield Brain & Spine court. Mayfield Brain & Spine Institute is easier for me to say.

Jeanie Luciano:

Okay. Lot of hard work there, Amy. So can I just ask? You talked about Ted and you talked about Connor and Anthony. How do you think that your stroke has impacted your family both for the good and the bad? How are things?

Amy Graham:

It impacted everybody. My kids started struggling a little bit in school, but it's getting better, but we're handling. My husband, so he is a paramedic. He had to stopped being a paramedic. He also works in the emergency room at one of our hospitals. He works all weekends to where he can be off during a week to take me to my doctor's appointments and my therapy appointments. So we had to like make... And then my family has helped also.

Jeanie Luciano:

Okay. That's great. I just have... I'm trying to stop sharing my screen here. I'm sorry. I want to say if anybody has any questions, they can put them in the chat. If anybody has any questions for Amy, not in the chat, but in the question section... Oh Amy, we got some questions here.

Amy Graham:

I would say, yeah, ask me anything. I'm an open book.

Jeanie Luciano:

You're an open book. I know. She really... There were no qualifiers for this interview with Amy.

Amy Graham:

Yeah. I [inaudible 00:27:20] talk about anything.

Jeanie Luciano:

So hearing that there're so... People so happy to see your face today that you were one of their favorite ER nurses.

Amy Graham:

I don't know if that's some of the doctors that used to work with me. They used to be like, "Oh boy, here she comes."

Jeanie Luciano:

Now people were asking, I guess like, what was the etiology? Was your sister's etiology the same as yours?

Amy Graham:

She was small vessel disease. She actually was her cholesterol. She had a lacunar stroke. I'm sorry, not a lacunar. She had a stroke in her pons. The things she presented to her ER as a dizzy plus and her eyes were deviated. And the thing is they sat her in the ER and they all thought she was Bell's palsy. And when she called me and FaceTimed me, I said, "Get the ER doc on my phone now. Go to CT." Because she was dizzy nauseated and vomiting. She went back to sleep, and then she went to the hospital eight

hours later. And she didn't call me till she was in the hospital. And I said, "Get the..." And they finally sent her and then they found that she had a stroke in her pons.

Jeanie Luciano:

Wow.

Amy Graham:

And they just kind of watched her. And so she did okay after her stroke for 24 hours. And they discharged her. And the thing is, she went to a comprehensive stroke center. I was a little aggravated that they didn't get her to CT faster. And you know? Because she could have been in the window for tPA... Well, I don't know. Sorry. It could be she might have waited too long to go to the hospital in their defense.

Jeanie Luciano:

Right. It's always hard being the healthcare provider family member, isn't it?

Amy Graham:

Yes. But she's... Let's see. About eight months after her stroke, she ran a 5K down in Florida. She's doing really well. She has a little bit of memory issues, but other than that, you wouldn't know she'd had a stroke.

Jeanie Luciano:

So Amy, there's a question here. It says, "Amy, it's so good to see you. I'm curious about how your stroke has changed your perspective as a stroke coordinator."

Amy Graham:

I'm even more passionate about our patients and making sure they get great care. I'm very lucky. I have an awesome team that works with me at Good Sam Hospital in Cincinnati, Ohio. My team is very supportive of me. I'm very a big and educated family... I think if my husband wasn't a paramedic for the family component, it would be a big difference. And just thinking about the family, that patient that don't have the family medical, that family that has medical knowledge really educate the family.

Jeanie Luciano:

Sure. Having that advocate for you, you were fortunate. And I don't know that we even pointed out earlier that Ted was a paramedic.

Amy Graham:

Yes.

Jeanie Luciano:

So he was that healthcare provider, family member, right?

Amy Graham:

Yes.

Jeanie Luciano:

You're getting a lot of kudos in your comments. Amy, you're a rockstar.

Amy Graham:

Thank you.

Jeanie Luciano:

People think you're just amazing. And that's not new with her stroke, folks. And people who know Amy know that. So there's a lot of... You know? People are thankful for the information around on post-stroke depression because that's something I feel like we have a lot of room that we can do better with. Don't you?

Amy Graham:

Mm-hmm (affirmative). The other thing I do want to tell everybody that's listening, this was new at our comprehensive survey. I never had a surveyor ask me in all the... Oh, dang it.

Jeanie Luciano:

All the surveys?

Amy Graham:

Yes. Thank you. All the surveys I've been to, they're starting to ask about missed eligibles. So when you guys are using your Get With the Guidelines, go to your data download and make sure you're tracking the tPA you're not getting it, and have those reason for Joint Commission ready. They were asking a lot of questions about that this time.

Jeanie Luciano:

I think it's funny. Amy, you had shared with us about one of the things that you didn't forget at all. And what was that?

Amy Graham:

I did not forget my Get With the Guidelines and how I run the reports and things. I mean, I'm still not great with my spreadsheets and my Excel. I still have a lot of help, but when it comes to running reports and use of data download, I'm still there. I can still make my reports in Get With the Guidelines because it's so helpful to take that data and be able to abstract it and make reports that work for me, and makes it a little easier to collect my data. The data download is everything.

Jeanie Luciano:

Yeah. It's like riding a bike.

Amy Graham:

Yeah. Thank the Lord. I was worried that if anything changed because I was gone so long.

Jeanie Luciano:

Yeah.

Amy Graham:

But you guys had the webinars to help me out. So that was nice.

Jeanie Luciano:

Well, you know, any of your AHA friends are here for you. People really appreciate you sharing the human component, the impact on your family, the post-stroke depression. I think one of the things I just... I think your passion for stroke, if it... I never could have imagined it could have been stronger than it was before when you were working with the AHA. And it just truly... You know? The fact that you point out that your passion increased is impressive. Anyone-

Amy Graham:

For sure. I don't want anybody to go through what I had to go through.

Jeanie Luciano:

Yeah. Any last comments, any parting words for people about your experience? I always say that the hardest learned lessons are the ones that we learned from the other side of the bed. Any parting words or suggestions for people?

Amy Graham:

I would say even though your patient is sedated, to be honest, they can still hear you. You'd be surprised at what I remember hearing once I was intubated. And they thought, "Oh, she's intubated, sedated. Don't worry about her," but I could hear everybody talking over me and talking to me, because my best friend, she goes, "Amy, I need you to fight. You need to fight." And once I heard that and that's when I thought, "Oh heck no, I'm not going anyway." And that's when I pulled my tube out. So just remember your patients can hear you. Talk to them like they're there. Even though they're intubated sedation, hearing is the last thing to go.

Jeanie Luciano:

That's a great suggestion. So after you got home, just asking as a person who... You know? We all know people who have gone through a health crisis. What would you suggest to family and friends? What's the best thing people could do for you after you were home and trying to regain some normalcy in life?

Amy Graham:

When you first get home, be there, just offering a helping hand, help guiding that person. I can tell you when I first had my stroke, my brain stayed fuzzy probably until... If I have my stroke in July, I think probably until August, November till I really kind of really get what's going on around me. A lot of it was just people walking in and out. It was just hard for my brain to keep up.

Amy Graham:

The other thing is if you do have a patient that have a large vessel occlusion like me, talk to them one person at a time. My brain, like right now, it bounces between... If there is background noise, my brain has a hard time concentrating on one thing at a time. It bounce it back. Like, it'll go to somebody's talking to somebody else. It's hard to concentrate with the stroke, but that's-

Jeanie Luciano:

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That's a great, great recommendation, I think. Definitely everyone wants to help and sometimes people don't know how to help. And I think that's a great idea.

Amy Graham:

The shower chair is everything. Any equipment, the shower chair. [inaudible 00:36:10]-

Jeanie Luciano:

There's a question here. Did you attend any stroke support groups?

Amy Graham:

Not yet. Because every time I miss them, I either find out a day too late. There is something in our area at the rehab facilities. It's just I always end up missing. I do want to go to them because I feel like it could be important because just to talk to other people to see, compare what my function and how they're dealing with, because I want to learn about other people's stories. But I do want to go to the support groups.

Jeanie Luciano:

That's great. There's a question here. And it says that this is a personal question, and this person has gone through something similar to you. She wanted to know if providers discussed at all any intimacy after stroke? Anybody in the inpatient setting or in rehab, did they have that conversation with you at all?

Amy Graham:

No. To be honest, what I thought for a while, wait till my brain comes back a little bit more, but no, nobody has talked to me about that.

Jeanie Luciano:

Okay. That's good. That's good suggestion. I think that...

Amy Graham:

Yep. Because when you're... Yeah, it's just especially because you're married, things-

Jeanie Luciano:

You're clearly a stroke-

Amy Graham:

Yeah. And when you get a little better to go back to normal. Mm-hmm (affirmative).

Jeanie Luciano:

Yeah. But you're clearly a stroke hero. She actually, yesterday, did a recording in Cincinnati. Was it, Amy, for Go Red?

Amy Graham:

Yeah. Go Red For Women for in May. The month of may. Mm-hmm (affirmative).

Jeanie Luciano:

Yeah. So she's really in demand, but now you all know where to get her. So we were lucky to have this time with you today and to really... You know? This hits home to a lot of us. You know? None of us see us being in that position, but we never know. Right?

Amy Graham:

Yeah, I couldn't do anything without my PT and OT and my team helping me between my boss and all my team members. My person that works my partner and Kim Schmorzer, she's a stroke coordinator. She is amazing. Amazing. Jeanie, you should meet her. If you come to Cincinnati, she's just great. You got to meet her.

Jeanie Luciano:

And Ted and the kids, right?

Amy Graham:

Yes.

Jeanie Luciano:

I know Ted misses hearing us talk when you were working for the AHA. We used to drive him crazy.

Amy Graham:

Yeah. He used to love to listen to Jeanie. He really... Jeanie cracks him up. Jeanie's right.

Jeanie Luciano:

But we appreciate your time. We know how tiring this is for you and that it takes a little bit more effort, but we appreciate your time. We appreciate your perspective, Amy. And we really... You know? Keep it up. Keep working hard because you are totally worth the investment of every bit of effort you can put in.

Amy Graham:

Sure. And if anybody has any question about the data download for the missed eligibles, just let me know and I could probably send them... Well, I can't because there's data on there. I can send... I can make like a little cheat sheet for them if they want to. I think Abby might still have. If Abby Loechler, if she's your AHA contact, she might still have my... She might have the information.

Jeanie Luciano:

So Amy is still working, even though she told me she was not working today. So she's still working from afar. But I'm going to hand it off to Gino to sign us of today. But Amy, thank you so much. We really appreciate you. You have a lot of people behind you.

Amy Graham:

Thank you. Jeanie. Thank you, everybody.

Jeanie Luciano:

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You have a lot of people wishing you well.

Amy Graham:

I wish them and all my friends in Kentucky and Cincinnati, thank you for joining and I miss you guys. I can't wait to see you in person.

Jeanie Luciano:

Thanks, Amy. Thank you, Ted, for your technical assistance early. Go ahead, Gino.

Gino Mollica:

That's right. Well, thank you, Amy, so much for this remarkable story. And I'm definitely going to be sure to get you all of the comments after the webinar here. So I'll be sure to send those over in an email so you can see them and what everybody has to say.

Amy Graham:

Thank you. Thank you so much.

Gino Mollica:

Absolutely. Absolutely. And thank you everyone for attending. After the webinar today, you'll receive an email with just a short survey. We appreciate it if you would fill it out as well as within 24 to 48 hours, you'll get a link to be able to review and see today's recording. So you'll be able to share that link with other folks too that might have missed this wonderful talk with Amy. On behalf of the American Heart Association and Amy, thank you guys so much for joining and have a great rest your day.

Jeanie Luciano:

Thank you, Amy. You're the best.

Amy Graham:

You're the best, Jeanie. I love you so much.

Jeanie Luciano:

We love you too. Take care of yourself. See you soon.

Amy Graham:

Thank you everybody from AHA. Keep doing what you're doing because I'm going to keep raising money for AHA. You guys are amazing.

Jeanie Luciano:

Thanks, Amy. Take care. Bye-bye.

Amy Graham:

Okay. Bye-bye.