

# STROKE/TIA

## Indications

- Sudden onset of weakness/paralysis, speech or gait disturbance

ALS RMC

- IV access (AC preferred) if patient meets Early Stroke Notification criteria
- Elevate head of bed 20-30° or place in left lateral recumbent

### If last known well <4.5 hours and BG >60

- Provide Early Stroke Notification if any are true:
  - Abnormal Cincinnati Pre-hospital Stroke Scale (CPSS) score
  - Abnormal Visual Fields Assessment
  - Abnormal Cerebellar Assessment
  - Symptoms are most likely due to stroke and not a stroke mimic

### If the patient meets criteria for early notification

- During radio report, provide patient identifying information- medical record number if known and/or last name and DOB of patient
- Rapidly transport to patient's preferred Primary Stroke Center (PSC), as long as the estimated transport time is not >15 min longer than the closest PSC
  - Preferred PSC: patient's preference or PSC with patient's medical records
  - No preferred PSC: transport to the closest PSC
- Notify family members/medical decision maker that their immediate presence at the hospital is critical for optimal care
- Bring names and best phone numbers for the patient's medical decision maker and who last saw the patient normal whenever possible

**If high suspicion of rapidly progressive intracranial bleed**  
(sudden, witnessed onset of coma or rapidly deteriorating GCS especially in the setting of severe headache)

- Transport to MarinHealth Medical Center

### **Cincinnati Pre-Hospital Stroke Scale (CPSS)**

- Facial Droop (the patient shows teeth or smiles)
  - Normal: Both sides of the face move equally
  - Abnormal: Right side of the face does not move as well as the left
  - Abnormal: Left side of the face does not move as well as the right
- Arm Drift (the patient closes their eyes and extends both arms straight out for 10 seconds)
  - Normal: Both arms move the same, or both arms do not move at all
  - Abnormal: Right arm either does not move, or drifts down compared to the left
  - Abnormal: Left arm either does not move or drifts down compared to the right
- Speech (the patient repeats “The sky is blue in Cincinnati” or another sentence)
  - Normal: The patient says the correct words with no slurring or words
  - Abnormal: The patient slurs words, says the wrong words, or is unable to speak

### **Visual Fields/Cerebellar Assessment**

- Visual Fields Assessment
  - Normal: Patient able to count fingers in all four visual field quadrants
  - Abnormal: Patient unable to correctly count fingers in one or more visual field quadrants
- Cerebellar Assessment (finger-to-nose)
  - Normal: Patient able to move their index finger from their nose to the examiner’s finger
  - Abnormal: Patient exhibits clumsy/unsteady movements or “overshoots”