

SUSPECTED STROKE

ALL PROVIDERS

- ☐ Focused history and physical exam
 - Blood glucose, temperature and oxygen saturation assessment
 - Keep NPO
- ☐ Cardiac monitor, blood pressure, ETCO₂, and pulse oximetry, when available.
- ☐ 12 Lead EKG if available
- ☐ **Treatment Plan**
 - Rapidly transport
 - Transport to a Stroke Receiving Facility if they will arrive at the facility in less than 120 minutes from the confirmed onset of the stroke like symptoms.
 - Transport to a Primary Stroke Center if they would arrive at a stroke-receiving center later than 120 minutes from the confirmed onset of the stroke like symptoms
 - If you do not have a Stroke Receiving Facility or Primary Stroke Center, transport to local hospital or consider air medical transport
 - If you are unable to confirm the onset time of the stroke-like symptoms, or they started more than 12 hours prior to transport, then transport to the closest appropriate facility or to the facility of the patient's choice
 - Alert the appropriate emergency department that you are transporting a suspected stroke patient as soon as you have made a destination decision
- ☐ **Pediatric Considerations**
 - Children can have strokes as well as adults. Some risk factors include; sickle cell disease, congenital or acquired heart disease. Children with head and neck infections, systemic conditions, such as inflammatory bowel disease and autoimmune disorders. Also at risk are children with head trauma or dehydration.

ADULT

PEDIATRIC (<15 years of Age)

NOTE: Pediatric weight based dosing should not exceed Adult dosing.

EMT

- ☐ Evaluate and Document Cincinnati Stroke Scale criterion during assessment (if any of these 3 findings is abnormal, the probability of stroke is 72%)
 - **Facial Droop**
 - Normal: Both sides of face move equally
 - Abnormal: One side of face does not move at all
 - **Arm Drift**
 - Normal: Both arms move equally or not at all
 - Abnormal: One arm drifts compared to the other
 - **Speech**
 - Normal: Patient uses correct words with no slurring
 - Abnormal: Slurred or inappropriate words or mute

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AEMT

- ☐ Advanced airway, vascular access and fluid therapy per *IV-IO Access and Fluid Therapy Guidelines*

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PARAMEDIC

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