

<u>Say "Stroke Alert" in Hospital Entry Note</u> if patient meets the Stroke Criteria, even if symptoms have resolved

EMT / EMT-INTERMEDIATE / ADVANCED EMT / PARAMEDIC STANDING ORDERS

- Routine Patient Care.
- Perform Massachusetts Stroke Scale, or equivalent nationally recognized stroke scale.
- Clearly determine time of onset of the symptoms or the last time seen well.
- If the patient wakes from sleep or is found with symptoms of stroke, the time
 of onset of first symptoms is defined as the last time the patient was
 observed to be normal. Notify the emergency department as soon as
 possible.
- If any one of the signs of the stroke scale is abnormal and onset of symptoms are less than **5 hours**, notify receiving hospital of a "Stroke Alert".
- Elevate the head of the stretcher 30 degrees.
- Do not delay transport for ALS intercept.
- Consider transporting a witness, family member, or caregiver with the patient to verify the time of the onset of stroke symptoms.
- If the onset of signs and symptoms PLUS transport time is <4.5 hours, consider transport to the most appropriate facility in accordance with local guidelines/agreements.

1. One or more abnormal findings of MASSACHUSETTS STROKE SCALE

FACIAL DROOP (Patient shows teeth or smiles)

- Normal: Both sides of face move equally
- Abnormal: One side of face does not move as well as the other

ARM DRIFT (Patient closes eyes and extend both arms straight out for 10 seconds.)

- Normal: There is no drift at all or both arms drift the same
- Abnormal: One arm drifts/moves down compared to the other arm or one arm noticeably weaker than the other.

SPEECH (Score first attempt: Patient repeats, e.g. "The sky is blue in Boston.")

- Normal: The Patient says the correct words with no slurring of words on first attempt.
- Abnormal: The patient slurs words, says the wrong words or is unable to speak on first attempt

<u>OR</u>

2. One or more Sudden Acute Stroke Symptoms, including:

- Sudden numbness, weakness or paralysis of face, arm or leg especially on one side of the body;
- Sudden confusion, trouble speaking or understanding speech;
- Sudden trouble seeing in one or both eyes;
- Sudden trouble walking, loss of balance or coordination; or
- Sudden severe headache with no known cause



Avoid hyperoxygenation; oxygen administration should be titrated to patient condition, and withheld unless evidence of hypoxemia, dyspnea, or an SpO2 <94%, especially in the presence of a suspected CVA/TIA or ACS.

Stroke

This checklist is included as a resource for EMTs and receiving hospitals. If used, please leave a copy with the patient and document all elements on Patient Care Report						
Date: Patient's Name:	Amb #:	Pt. Age: DOI	3:	□М	□ F	
	STF	ROKE ALI	ERT	! Crite	ria:	
Time last known we Any abnormal findir trauma?	,		s]	NO	Unknow	n
Blood Glucose >60°	?					
	ES to one or nave resolved		ay "Str	oke Alert"	in Hospita	I Entry Note, even
Massachusetts Stroke Scale: (Check if abnormal and new)				History:		
F – (Face) <u>Facia</u> Have patient smi for asymmetry) Abnormal: One side as well as the other. A – (Arms) <u>Moto</u>	le or show te e of the face doe	`		Head Trai Seizures Cardiac A Recent/cu bleeding, surgery or procedure Bleeding of	uma/ rrhythmias [irrent trauma, [invasive	warfarin Pradaxa/ dabigatran Xaralto/ rivaroxaban Eliquis/apixaban

palms up)

Abnormal: One arm drifts down or noticeably weaker than the other.

S - (Speech)

Phrase: "The sky is blue in Boston" (repeat phrase, score first attempt) Abnormal: Words are slurred (dysarthria) or abnormal (asphasia) or none at first attempt

T – (Time)

Time Last Known Well:

AM/PM

Blood Glucose Level:

mg/dL

	Descriptions: Head Trauma/ Seizures Cardiac Arrhythmias Recent/current bleeding, trauma, surgery or invasive procedure Bleeding disorder Pregnancy	Medications: Coumadin/ warfarin Pradaxa/ dabigatran Xaralto/ rivaroxaban Eliquis/apixaban aspirin			
Sudden Acute Stroke Symptoms:					
☐ Sudden numbness, weakness or paralysis of face, arm or leg especially one side of the body					

□ Sudden confusion, trouble speaking or

□ Sudden trouble seeing in one or both eyes

□ Sudden trouble walking, loss of balance or

☐ Sudden severe headache with no known

understanding speech

coordination; or

cause