

STROKE / TIA

A patient experiencing a Cerebrovascular Accident (CVA or stroke) may have a variety of presentations. Most commonly, the patient will experience a new onset of unilateral weakness (hemiparesis), paralysis (hemiplegia), difficulty speaking (aphasia), or a combination of these. The pre-hospital goal is to maintain stable vital signs, increase oxygen delivery, protect the patient's airway, and provide psychological support. Early recognition of stroke symptoms and early hospital notification is important.

- A. Perform **Initial Treatment / Universal Patient Care Protocol**.
- B. Determine exact time of symptom onset (last time patient seen normal).
- C. Assess patient for the following neurological deficits, **including time of onset of each of the symptoms** (determine *Cincinnati Pre-hospital Stroke Score*):
 - 1. Speech disturbances (abnormal speech).
 - 2. Facial weakness or paralysis (facial droop).
 - 3. Extremity weakness or paralysis (arm drift).
- D. Immediate transport with head elevated and on left side if decreased level of consciousness.

E. Notify **Medical Command**.



F. If decreased level of consciousness:

- 1. Check serum glucose level and treat per **Diabetic Emergency Protocol 6604**.
- 2. Obtain 12 lead EKG and transmit copy or computer interpretation to **Medical Command** and to the receiving facility.

G. Establish Transport Mode (ground vs air) and destination in consultation with **Medical Command**.



Note: *If possible, transport a witness, family member, or caregiver with the patient to verify the time of onset of stroke symptoms.*