

**TREATMENT:**

- A. Treat per Universal Patient Care protocol.
- B. Monitor cardiac rhythm, obtain 12 lead ASAP and provide to receiving facility.
- C. If CBG is low, administer **Dextrose 10% 100 ml IV** repeat as needed.
- D. Complete **EMS/ED Triage Stroke Screening**: BE-FAST
- E. If EMS/ED Triage Stroke Screen BE-FAST is positive, Perform C-STAT assessment
- F. Transport patient in supine position with > 15 degree of head elevation if tolerated.
- G. Prepare to suction airway as needed
- H. Document serial neurologic examinations.
- I. If patient meets criteria below, activate “**Stroke 1**” by dialing **1-800-461-6049**, request a Stroke 1 and give ETA to receiving hospital.

**NOTES & PRECAUTIONS:**

- A. Do not treat hypertension or give aspirin.
- B. Acute interventions, if indicated, generally must begin within 24 hrs of symptom onset. All potential stroke patients should go to an appropriate stroke center.
- C. Consider Code 3 transport based on patient presentation.

**KEY CONSIDERATIONS:**

- A. Time “**last known well**”
- B. Pertinent medical history including: GI bleeding, trauma or surgery in last 3 months, prior CVA/TIA.
- C. CBG, neurological exam(including pupils)
- D. Taking the blood thinners- heparin, Xarelto/rivaroxaban, Eliquis/apixaban, Pradaxa/dabigatran, Coumadin/warfarin.

**EMS/ED STROKE SCREEN**

- A. EMS will conduct BE-FAST and C-STAT Stroke Screenings
  - 1. If onset 0 - 24 hrs and patient has positive BE-FAST and/or C-STAT positive: Activate Stroke 1 even if symptoms improving.

	BE FAST Stroke Screen	Normal	Abnormal	
<b>B</b>	<b>Finger to nose, gait test</b>	Normal	Balance	Gait/Ataxia
Balance	Normal: Not dizzy, steady gait			
	Abnormal: Inability to walk, abnormal gait, ataxia			
<b>E</b>	<b>Visual Acuity, visual field assessment</b>	Normal	Left	Right
Eyes	Normal: Vision normal for patient, with or without correction			
	Abnormal: Sudden double or blurred vision, blindness, visual field cut			
<b>F</b>	<b>Have patient smile or show teeth</b>	Normal	Left	Right
Face	Normal: Both sides of face move equally			
	Abnormal: 1 side of face weak/unequal/movement absent			
<b>A</b>	<b>Extend arms, close eyes, palms up</b>	Normal	Left	Right
Arm	Normal: Both arms move equally or not at all			
	Abnormal: 1 arm drifts compared to the other			
<b>S</b>	<b>Ask patient to repeat, “You can’t teach an old dog new tricks”</b>	Normal	Slurred	Fluency/ Comprehension
Speech	Normal: Patient uses correct words with no slurring			
	Abnormal: Speech fluency disruption, slurred speech or is mute			
<b>T</b>	<b>Onset and Last seen normal</b>	Time		
Time	New onset of neurologic deficit within the last 24 hours?	Yes	No	

If 1 or more components of the BE FAST Stroke Screen is abnormal and the patient was last seen normal < 24 hrs - **ACTIVATE STROKE 1**

Continue to C-STAT evaluation.

Cincinnati Stroke Triage Assessment Tool - C-STAT		
	Points	Definition
<b>GAZE</b>		Unable to look in certain direction with both eyes.
Absent (Normal)	0	
Present (Abnormal)	2	
<b>ARM WEAKNESS</b>		Cannot hold up arm(s) for 10 seconds.
Absent (Normal)	0	
Present (Abnormal)	1	
<b>LEVEL OF CONSCIOUSNESS</b>		Incorrectly answers at least 1 of 2 LOC questions <b>AND</b> does not follow at least 1 of 2 commands.
Absent (Normal)	0	<b>LOC Questions</b> - What month is it? How old are you?
Present (Abnormal)	1	<b>LOC Commands</b> - Open your eyes. Make a fist.
<b>***C-STAT POSITIVE IS DEFINED AS A SCORE OF <math>\geq 2</math>***</b>		

If 1 or more components of the BE-FAST Stroke Screen is abnormal and the patient has a Positive C-STAT score, and the patient was last seen normal < 24 hrs.  
**ACTIVATE STROKE 1**