

SIERRA-SACRAMENTO VALLEY EMS AGENCY
TREATMENT PROTOCOL-MEDICAL EMERGENCY

NEUROLOGICAL
REFERENCE NO. N-3

SUBJECT: SUSPECTED CVA / STROKE

BLS

- Assess ABCs
- Assess respiratory status/Hi-flow O₂
- Assess V/S
- Assess History & Physical
- Determine degree of illness

ALS

- Cardiac Monitor
- Check Blood Sugar

Suspect CVA:

- New onset lateralizing neuro signs
- Unexplained new altered level of consciousness(GCS <14) without response to Glucose, Glucagon or Narcan

- Pre-alert receiving hospital
- Report new onset deficits and when was the patient last seen normal

Consider advanced airway if GCS \leq 8

IV or IO @ TKO rate

Contact Receiving Hospital

Cincinnati Prehospital Stroke Scale
New Onset Symptoms

Facial Droop

(Have pt show teeth or smile)

Normal= both sides of face move equally well.

Abnormal= one side of face does not move as well as the other side.

Arm Drift

(Pt closes eyes & extends both arms straight out for 10 seconds)

Normal= both arms move the same or both arms do not move at all.

Abnormal= one arm does not move or one arm drifts down compared with the other.

Speech

(Have pt say: "You can't teach an old dog new tricks")

Normal= Pt uses correct words with no slurring.

Abnormal= Pt slurs words, uses the wrong words or is unable to speak.

Interpretation: If any 1 of these 3 signs is abnormal, the probability of a stroke is 72%

Effective Date: 06/01/2009

Next Review Date: 4/2012

Approved by:

Date last reviewed revised: 4/09

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