

STROKE SMARTS

ON-SCENE MANAGEMENT

1. Stroke Recognition & Severity Screen
2. Obtain Information & Provide Instructions
3. Preparing to Hand Off to EMS



TIME IS BRAIN

Stroke Symptom Onset to Imaging

FAST Screening Tool for Stroke Recognition

LAMS Screening Tool for Stroke Severity

1

ONE sign is considered a positive result



F
FACE
Unilateral facial droop



A
ARM
Unilateral arm/leg weakness or drift



S
SPEECH
Slurred speech, difficulty expressing words, word finding or difficulty understanding



T
TIME
Time of last known well

Score of > 4 is considered positive result



STEP 1
FACIAL DROOP

0 Facial droop absent
1 Facial droop present



STEP 2
ARM DRIFT

0 Absent
1 Drifts down
2 Falls rapidly



STEP 3
GRIP STRENGTH

0 Normal
1 Weak grip
2 No grip



STEP 4
ADD THE SCORE

LVO positive if score is ≥ 4



Obtain information from the patient, family members or other witnesses about the suspected stroke event

Provide instructions to the patients' family

2

- Presenting symptoms
- Time of onset or time of symptom recognition and time last known well
- Sequence of events
- Co-morbid conditions
- Current medications (especially anticoagulants)
- Any formal or informal advance directives that may influence care by EMS and in the ED

- Recommend that one family member to accompany the patient to hospital or be accessible by phone for decision-making
- Confirming time last known well
- Providing information about
 - existing health conditions: Explain imaging
 - current medications: Get list/bag of meds
 - other information: Previous stroke?

Remove extrication barriers in the home

Clear a path! Move what you can to remove obstacles
Shoes, tables, rugs are barriers for extricating patient quickly and safely
Move pets, put in cages or tied up, clear snow or ice, unlock doors



3

Monitor the patient for changes

Communicate those changes with a call back
You are a direct line of communication for updates
LOC, further deterioration of weakness, seizures etc

Organized for rapid assessment and treatment

Rapid recognition of symptoms, EMS mobilization and transport the patient for rapid diagnosis and time sensitive treatment of stroke including neuroimaging and acute treatment

Time lost due to **inefficient on-scene care** cannot be made up during subsequent transport to hospital, regardless of the use of lights and sirens

www.nwestroke.ca