## **CVA Checklist**

If Cincinnati Stroke Scale is POSITIVE (any one of the three tests shows abnormal findings), then assessment should include FAST-ED/Large Vessel Occlusion Screen. **LVO Screen by Paramedic Only** 

## Cincinnati Pre-hospital Stroke Scale

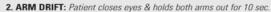
1. FACIAL DROOP: Have patient show teeth or smile.



Normal: both sides of the face move equally



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





Normal: both arms move the same or both arms do not move at all



Abnormal: one arm does not move or drifts down compared to the other

3. ABNORMAL SPEECH: Have the patient say "you can't teach an old dog new tricks."

Normal: patient uses correct words with no slurring

Abnormal: patient slurs words, uses the wrong words, or is unable to speak

Item	FAST- ED Score	Descriptions	
Facial Weakness/Asymmetry		Ask the patient to smile or show teeth or gums	
Symmetrical Movement	0	Facial movement is symmetrical	
Asymmetrical Movement	1	Unequal smile or grimace, or obvious facial asymmetry	
Arm weakness		Ask the patient to close eyes & lift the patient's arms together	
		palms up to 90 degrees if sitting and 45 degrees if supine and ask	
		them to hold the position for 10 seconds, then let go.	
Normal	0	Both arms remain up >10 sec. or slowly drift down equally	
Mild	1	One arm drifts down in <10 sec. but has antigravity strength	
Moderate/Severe	2	Cannot maintain the arm against gravity and drops immediately	
Speech Content		Ask the patient to say a common phrase such as "You can't teach	
		an old dog new tricks." Have the patient name 3 common items.	
Normal	0	Speech content normal AND names 2-3 items correctly (if speech	
		is slurred but makes sense and naming is correct score as normal)	
Abnormal	1	Speech content clearly abnormal OR names only 0-1 items	
		correctly	
Speech Comprehension		Ask the patient: "Show me two fingers"	
Normal	0	Patient shows two fingers	
Abnormal	1	Patient cannot understand/does not show two fingers	
Eye deviation		Ask the patient to follow your finger while holding their head still	
Absent	0	No deviation, eyes move to both sides equally	
Partial	1	Patient has clear difficulty when looking to one side (left or right)	
Forced Deviation	2	Eyes are deviated to one side and do not move to the other side	
		(e.g. cannot follow finger)	
Denial/Neglect-Weakness		Ask the patient: "Are you weak anywhere?"	
Normal	0	The patient recognizes that they are weak	
Abnormal	1	The patient is weak but does NOT recognize they are weak	
Denial/Neglect		While holding the patient's weak arm, ask the patient: "Whose arm is this?"	
Normal	0	Patient recognizes the weak arm belongs to them	
Abnormal	1	Patient does NOT recognize the weak arm belongs to them	

## **Screening Process for Stroke Routing**

This Checklist applies ONLY to adult patients	(≥18 years old)	with signs and	symptoms of a	CVA and
<b>POSITIVE</b> Cincinnati Stroke Screen.				

FAST-ED/Large Vessel Occlusion Screen (LVO). Document score (≥ 4 = positive LVO screen)					
Notify dispatch on radio of "code stroke"					
Determine Last known well time and document					
o This is the last confirmed time the patient was symptom free, NOT the time symptoms					
were first noticed					

## LKWT

	<u>LVO &lt; 4</u>	<u>LVO ≥ 4</u>
0-3.5 hrs	CLOSEST	CLOSEST
3.5-8 hrs	CLOSEST	COMPREHENSIVE
>8 hrs	CLOSEST	CLOSEST
unknown	CLOSEST	COMPREHENSIVE
Wake-up 0-3.5 hrs CLOSEST		CLOSEST
Wake-up >3.5 hrs CLOSEST		COMPREHENSIVE

COMPREHENSIVE= KUMC, Research, St. Luke's Plaza
CLOSEST= closest stroke center regardless if primary stroke center or comprehensive
stroke center

\*Primary stroke centers: Advent Shawnee Mission, Menorah, Olathe, OPR, St. Luke's South, St. Joseph

\*Patients <18 years old with signs and symptoms concerning for CVA should be transported to Children's Mercy Hospital-Main regardless of time.