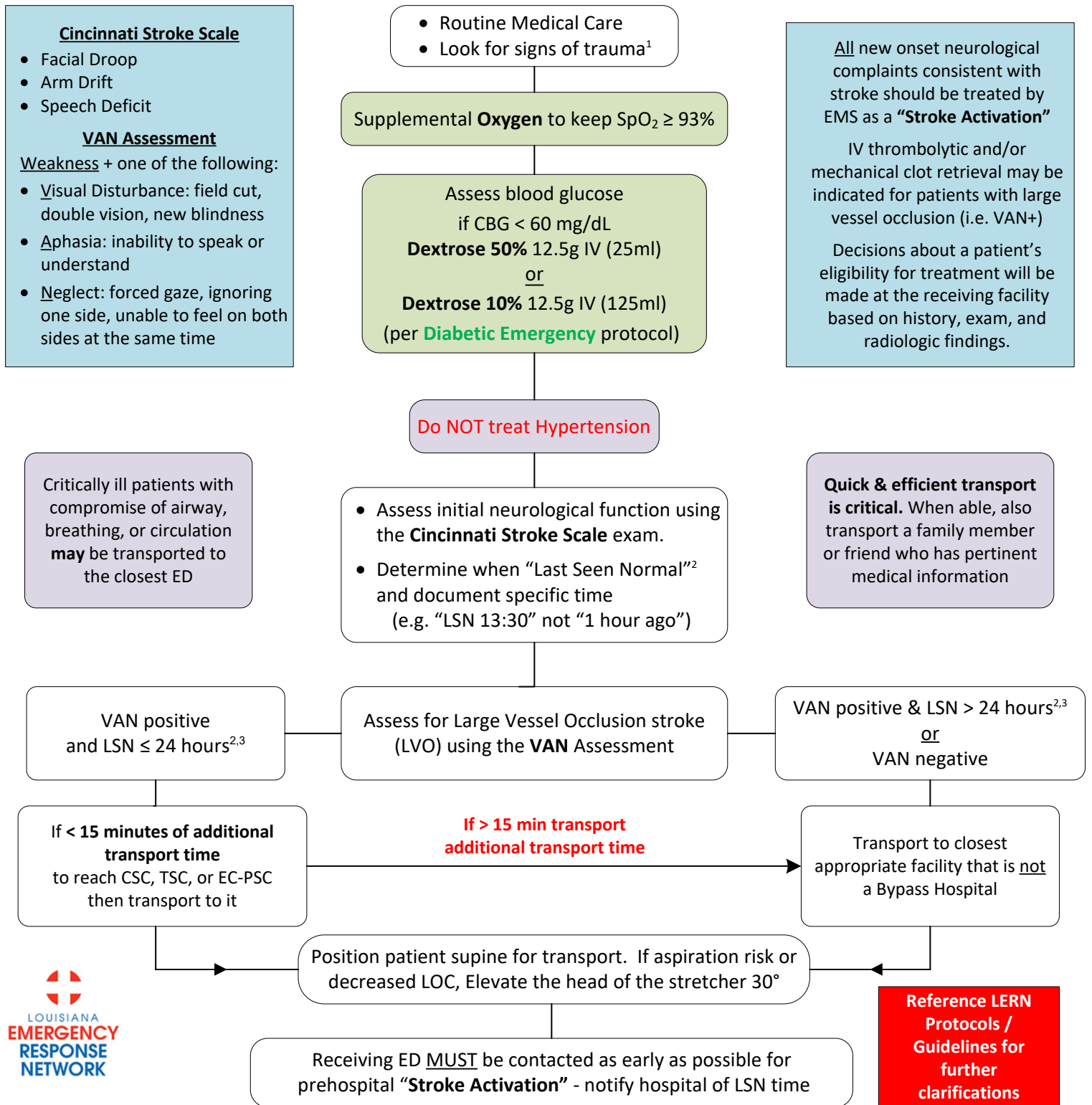


Stroke



¹ If patient has associated trauma and GCS ≤ 13, treat per *Head Injury* trauma protocol and consider transport to a Trauma Center - **ABCs** before D

² Last seen normal (LSN) is the time the patient reports being in normal state. If patient is unable to provide history, LSN is last seen in a normal state as stated by a bystander. If patient was awake at the time of symptoms onset or the acute deficit was witnessed, last normal = time of stroke onset (TSO).

³ Patients with an unclear time of onset, i.e. “Wake-Up” strokes, should be treated with the same urgency as those with a clear TSO. Some patients will have MRIs showing they are eligible to receive emergent treatment - IV thrombolytic +/- mechanical clot removal (i.e. thrombectomy).

⁴ **CSC = Comprehensive Stroke Center (fka Level 1). TSC = Thrombectomy Stroke Center (new designation). PSC = Primary Stroke Center (fka Level 2). EC = Endovascular Capable (i.e. thrombectomy able).** Traffic delays should be considered when factoring in time of transport.

• Consideration for stroke mimics (e.g. hypoglycemia, seizure, sepsis, migraine, intoxication) should not change a provider’s choice in hospital destination. Transport based on the most immediate life-threatening or disabling condition... that will usually be the stroke.