

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
EMT – Basic**

SMO: Stroke

Overview: Stroke (also known as cerebrovascular accident [CVA]) is a sudden interruption in blood flow to the brain that results in neurological deficit. This interruption can be caused by ischemia (blockage) or hemorrhage (bleeding). It is the third leading cause of death in the United States and frequently leaves its survivors severely debilitated.

INFORMATION NEEDED

- Presence of any of the stroke signs and symptoms
- Time of onset of symptoms

OBJECTIVE FINDINGS

- Numbness or paralysis on one side of the body
- Aphasia or slurred speech
- Confusion or coma
- Convulsions
- Incontinence
- Diplopia (double vision)
- Headache
- Dizziness or vertigo
- Ataxia

TREATMENT

- RMC
- Protect airway, suction as necessary. Seizure and vomiting precautions.
- Maintain head and neck in neutral alignment. Do NOT flex the neck.
- If BP > 90 mmHg, elevate head of bed 15 - 30°.
- If altered sensorium, seizure, or focal neurological deficit, obtain and record blood sugar level.
If blood sugar < 60, administer **GLUCAGON 1 MG IM** and note response.
- If seizure activity, notify Medical Control. Protect patient from harming self.
- Monitor and record neurological status and any changes. Protect paralyzed limbs from injury.
- RAPID transport. Consider ALS transport.

Documentation of adherence to protocol:

- Level of Consciousness
- Status of gag reflex
- Blood Glucose level
- Results of treatment provided

Medical Control Contact Criteria

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| <ul style="list-style-type: none"><input type="checkbox"/> Contact Medical Control for any questions regarding best treatment option for patient<input type="checkbox"/> Contact EARLY to ready hospital for arrival of patient and of suspicions of CVA. |
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PRECAUTIONS AND COMMENTS

- Caution should be exercised in patients with acute CVA's and associated hypertension. Lowering of their blood pressure should be done gradually over several hours not minutes.
- Whenever possible, the EMT should establish the time of onset of stroke signs and symptoms.

THE CINCINNATI PREHOSPITAL STROKE SCALE

Facial Droop (have patient 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 (patient closes eyes and holds both arms out):

- 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 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 inappropriate words, or is unable to speak

**REGION I EMERGENCY MEDICAL SERVICES
STANDING MEDICAL ORDERS
EMT – Paramedic**

SMO: Stroke

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- Ataxia

TREATMENT

- RMC
- Protect airway, suction as necessary. Seizure and vomiting precautions.
- Maintain head and neck in neutral alignment. Do NOT flex the neck.
- If BP > 90 mmHg, elevate head of bed 15 - 30°.
- If altered sensorium, seizure, or focal neurological deficit, obtain and record blood sugar level.
If blood sugar < 60, administer **DEXTROSE 50% 50 cc IVP** and note response.
- If seizure activity, **Valium (diazepam) 5 mg IVP** slow (over 1-2 minutes—may repeat X1 for maximum of 10 mg) OR **Versed (midazolam) 2 mg IVP** slowly (over 1-2 minutes—contact Medical Control for subsequent doses). If unable to secure IV, give **Valium 10 mg IM (or rectally) OR Versed 5mg IM**. Protect patient from harming self.
- Monitor and record neurological status and any changes. Protect paralyzed limbs from injury.
- RAPID transport

Documentation of adherence to protocol:

- Level of Consciousness
- Status of gag reflex
- Blood Glucose level
- Results of treatment provided

Medical Control Contact Criteria

- | |
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| <ul style="list-style-type: none"><input type="checkbox"/> Contact Medical Control for any questions regarding best treatment option for patient<input type="checkbox"/> Contact EARLY to ready hospital for arrival of patient and of suspicions of CVA.<input type="checkbox"/> For subsequent doses of Valium or Versed for seizure activity. |
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