

STROKE/TIA ADMINISTRATIVE ORDER

Initiate immediate supportive care:

O2 to maintain sat $\geq 94\%$
Complete primary and secondary survey as indicated
Vital Signs including FSBG (temperature as indicated)
Cardiac Monitor
12-Lead ECG

Use this AO on patients with any new onset neurological complaint or one of the following symptoms:

- Slurred speech
- Facial droop
- Unequal grips/arm drift
- Changes in mental status (not related to drugs, alcohol, or trauma)
- Sudden loss in vision
- Ataxia— acute changes in coordination (arms, legs or gait)

- Perform Cincinnati Stroke Scale and document results
- **Initiate 2 large bore IV NS/LR TKO, obtain blood draw**
 - Consider saline lock with NS flush
Push all meds slowly
- Obtain last known well time
- Obtain medication list (Important to know if patient on any blood thinners)
- Monitor for deterioration of mental status and airway
- If FSBG < 70: Consider **Altered Neurological AO** to correct



Transport to closest Primary Stroke Center

Primary Stroke Centers in Tucson:
BUMC, NMC, OVH, SMH, SJH, and TMC

If new Neurological complaint with an onset < 24 hours; relay “Stroke Alert” to the receiving facility

BLS transport may be allowed if meets BLS thresholds and neurological signs and/or symptoms are > 24 hours

Notification to include:

Stroke Administrative Order, unit number, patient age, gender, Last known well time, and ETA to receiving facility.

Advise if patient is unstable.