

**SAGINAW VALLEY
MEDICAL CONTROL AUTHORITY
PRACTICE PARAMETER**

CEREBROVASCULAR ACCIDENT (CVA, STROKE)

FIRST RESPONDER

I. General Management

- A. Evaluate and maintain airway, provide oxygenation and support ventilation as needed.
 - 1. **O₂ 4-6 LITERS PER NASAL CANNULA**
 - 2. **If Pulse O_x <95%, NRM @ 100%**
- B. Obtain vital signs (blood pressure, pulse and respiratory rate).
- C. Check Blood Glucose, if available.
- D. Try to elicit the following signs (abnormality in any one is strongly suggestive of stroke) utilizing the **CINCINNATI PREHOSPITAL STROKE SCALE**.
 - 1. **FACIAL DROOP** (have patient show teeth or smile).¹
 - 2. **ARM DRIFT** (have patient close eyes and hold both arms straight out for 10 seconds).²
 - 3. **ABNORMAL SPEECH** (have the patient say “you can’t teach an old dog new tricks”).³

BASIC LIFE SUPPORT

- E. Arrange for ALS intercept.
- F. Initiate transport toward ALS intercept, if transporting unit.

NOTIFY RECEIVING FACILITY

ADVANCED LIFE SUPPORT

- G. Monitor **EKG**
- H. **IV NORMAL SALINE @ TKO**
- I. If there is an altered level of consciousness, or patient is a known diabetic and blood glucose is <70mg/dl, Administer **DEXTROSE 50%, 25 gm IV (50cc)**.

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J. Avoid **antihypertensives**.

¹ a. Normal: both sides of face move equally well. b. Abnormal: one side of face does not move as well as the other side.

² a. Normal: both arms move the same or both arms do not move at all. b. Abnormal: one arm does not move or one arm drifts down.

³ a. Normal: patient uses correct words with no slurring. b. Abnormal: patient slurs words, uses the wrong words, or is unable to speak.

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