



CEREBRAL VASCULAR ACCIDENT (STROKE / CVA)



Escambia County, Florida – 1st Responder Medical Protocol

This protocol is used for those patients exhibiting signs consistent with acute Stroke / CVA / "Brain Attack" (altered mental status, slurred speech, loss of function of any body part, hemiplegia, loss of vision, weakness of facial muscles, loss of sensation, drooling, etc.).

Other causes should be ruled out (hypoglycemia, drug overdose, hypoxia, etc.).

Assessment

- A. Signs consistent with acute Stroke / CVA / "Brain Attack":
 - 1. Altered mental status
 - 2. Slurred speech
 - 3. Loss of function of any body part
 - 4. Hemiplegia
 - 5. Loss of vision
 - 6. Weakness of facial muscles
 - 7. Loss of sensation
 - 8. Drooling
- B. Other causes should be ruled out (hypoglycemia, drug overdose, hypoxia, etc.).
- C. See [General Supportive Care Protocol](#).

Treatment

- A. Conscious:
 - 1. Administer oxygen per [Oxygen Administration Protocol](#).



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Approved by:

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Charles Neal, D.O. Medical Director



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2. Consider nasopharyngeal airway. (See [Oral/Nasal Airway Protocol](#)).
3. If no vomiting, position patient with head elevated.
4. Note and record areas of weakness or paralysis, and time of onset.

Note:

- Calm, gentle handling of the patient and reassurance will decrease anxiety and increase oxygenation to the brain.
- Handle paralyzed extremities carefully.
- Avoid restriction of circulation in positioning the patient.

B. Unconscious:

1. Treat as unconscious patient per unconscious patient protocol.
2. Administer oxygen per [Oxygen Administration Protocol](#).

Note:

- Even if the patient is unconscious, avoid unnecessary comment as the sense of hearing may still be intact.

Report

- A. Report to crew as indicated in [General Supportive Care Protocol](#).



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