



# Stroke

## Assessment

### Pediatric Pearls:

- Use pediatric dosing of medications or electrical therapy for a pediatric patient < 37 kg and as defined by the PEDIA Tape.
- Pediatric hypotension is defined as SBP < 70 + (age in years x 2) mmHg

### Signs & Symptoms:

- Altered mental status
- Weak / Paralysis
- Blindness or other sensory loss
- Aphasia / Dysarthria
- Syncope
- Vertigo / Dizziness
- Vomiting
- Headache
- Seizures
- Respiratory pattern change
- Hyper/hypotension

### Differential:

- Altered mental status
- Transient Ischemic Attack (TIA)
- Seizure
- Hypoglycemia
- Hypoxia / Hypercarbia
- Stroke
- Thrombotic / Embolic (85%)
- Hemorrhagic (15%)
- Tumor
- Trauma
- Atypical migraine

## Clinical Management Options

P	P	P	P	P	P	<ul style="list-style-type: none"> <li>• Oxygen titrated and PRN</li> <li>• <a href="#">BGL</a> assessment</li> <li>• <a href="#">Cincinnati Pre-hospital Stroke Screen (CPSS) Assessment</a></li> <li>• Basic airway management</li> </ul>
L	L	L	L	L	L	<ul style="list-style-type: none"> <li>• Positive Stroke Screen &amp; Glucose &gt; 50 and last known well ≤ 24 hours, then declare <a href="#">Stroke Alert</a> and &lt; 15 minute-on-scene time</li> <li>• MRI Safety Screen – needs to be NO to all               <ul style="list-style-type: none"> <li>○ Implanted Electronics (Defibrillator, Pacemaker, Medication Pump)</li> <li>○ Vascular Clips in Brain (Previous aneurism)</li> <li>○ Metallic Foreign Bodies (Shrapnel, metal worker, screws)</li> </ul> </li> <li>• Place 4 &amp; <a href="#">12 lead ECGs</a>, <a href="#">EtCO<sub>2</sub></a></li> </ul>
1	2	3	4	5	6	<ul style="list-style-type: none"> <li>• <a href="#">Vascular access</a>, 2<sup>nd</sup> vascular access if time and patient conditions permit</li> <li>• Monitoring and interpretation of ECG &amp; EtCO<sub>2</sub></li> </ul>

### Consult Online Medical Control As Needed

### Pearls:

- Refer to drug formulary charts for all medication dosing for both adults and pediatric patients.
- Stroke patients are transported per Stroke Alert criterion and Hospital Transport Grid.
- Onset of symptoms is defined as the last time the patient was seen symptom free; example: Awakening with stroke symptoms would be defined as an onset time of the previous night when the patient went to bed symptom free.
- Whenever possible, a family member should accompany the patient to the hospital to provide a detailed history or provide the hospital with the name and contact information of someone who can.
- The differential list on the Altered Mental Status guideline should be considered.
- Be alert for airway problems (swallowing difficulty, vomiting).
- Hypoglycemia can present as a localized neurological deficit, especially in the elderly.
- Blood samples for performing glucose analysis should be obtained through a finger-stick (heel for infants). Venous blood samples may produce artificially high glucose values and should be avoided.
- IV access is preferred sizes 20g or 18g with AC placement.