



ORANGE COUNTY EMERGENCY MEDICAL SERVICES
BASE HOSPITAL TREATMENT GUIDELINES

SUSPECTED ACUTE STROKE OR INTRACRANIAL HEMORRHAGE (SNRC TRIAGE CRITERIA)

#: BH-M-25
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BASE GUIDELINES

1. SNRC TRIAGE CRITERIA:

If either of the following two sets of criteria is met and blood glucose is above 60 (or corrected to be above 60), triage to a Stroke Prepared Hospital:

Ischemic Stroke Suspected: All three of the criteria (→) below must be met:

- Glasgow Coma Score 10 or greater,
And
- New onset of any one of the following:
 1. Arm (pronator) drift or unable to raise arm, unilateral
 2. Facial paresis (droop)
 3. Slurred or unintelligible speech
 4. Loss of grip strength, unilateralAnd
- Onset of stroke symptoms within past 7 hours or no symptoms prior to going to sleep and awakening with stroke symptoms

Intracerebral Hemorrhage Suspected: Sudden, severe headache with onset in past 7 hours with any one of:

- ✓ Vomiting (repeated),
Or
- ✓ Neurological deficit (hemi-paresis or weakness, gaze to one side, or asymmetric pupils without prior eye surgery),
Or
- ✓ Altered mental status,
Or
- ✓ Marked blood pressure elevation (diastolic > 100 mm Hg).

2. OCEMS Designated SNRCs (Stroke Centers) include:

| | |
|-----------------------------|------------------------------|
| Fountain Valley Reg Med Ctr | Hoag Newport Beach |
| Los Alamitos Med Ctr | Orange County Global Med Ctr |
| Mission, Mission Viejo | Saddleback Memorial |
| St. Joseph Med Ctr | St. Jude Med Ctr |
| UC, Irvine Med Ctr | |

ALS STANDING ORDER

1. Base Hospital contact if patient meets Stroke Triage Criteria.
2. Give no fluid or solids orally (may be risk for aspiration), including oral glucose preparations; dissolving Ondansetron in mouth is appropriate.
3. Monitor cardiac rhythm and document with rhythm strip.
4. Pulse oximetry, if room-air oxygen saturation less than 95%:
 - ▶ *Provide high flow oxygen by mask or nasal cannula 6 l/min flow rate as tolerated.*
5. Consider hypoglycemia with blood glucose analysis. Treat a blood glucose of 60 or less using an option listed below. If hypoglycemia is suspected and blood glucose is in the range of 60 to 80, treatment based on field impression is appropriate.
 - ▶ *10% Dextrose 250 mL (titrated for effect to improve consciousness).*
 - ▶ *Glucagon 1 mg IM if unable to establish IV.*
6. For nausea or vomiting:
 - ▶ *Ondansetron (Zofran®): ODT 8 mg (two 4 mg tablets) to dissolve orally on inside of cheek*
OR,
4 mg IV, may repeat after approximately 3 minutes for continued nausea or vomiting.
7. If patient does not meet Stroke Triage Criteria, ALS escort to nearest ERC.

Approved:

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