

INDICATION

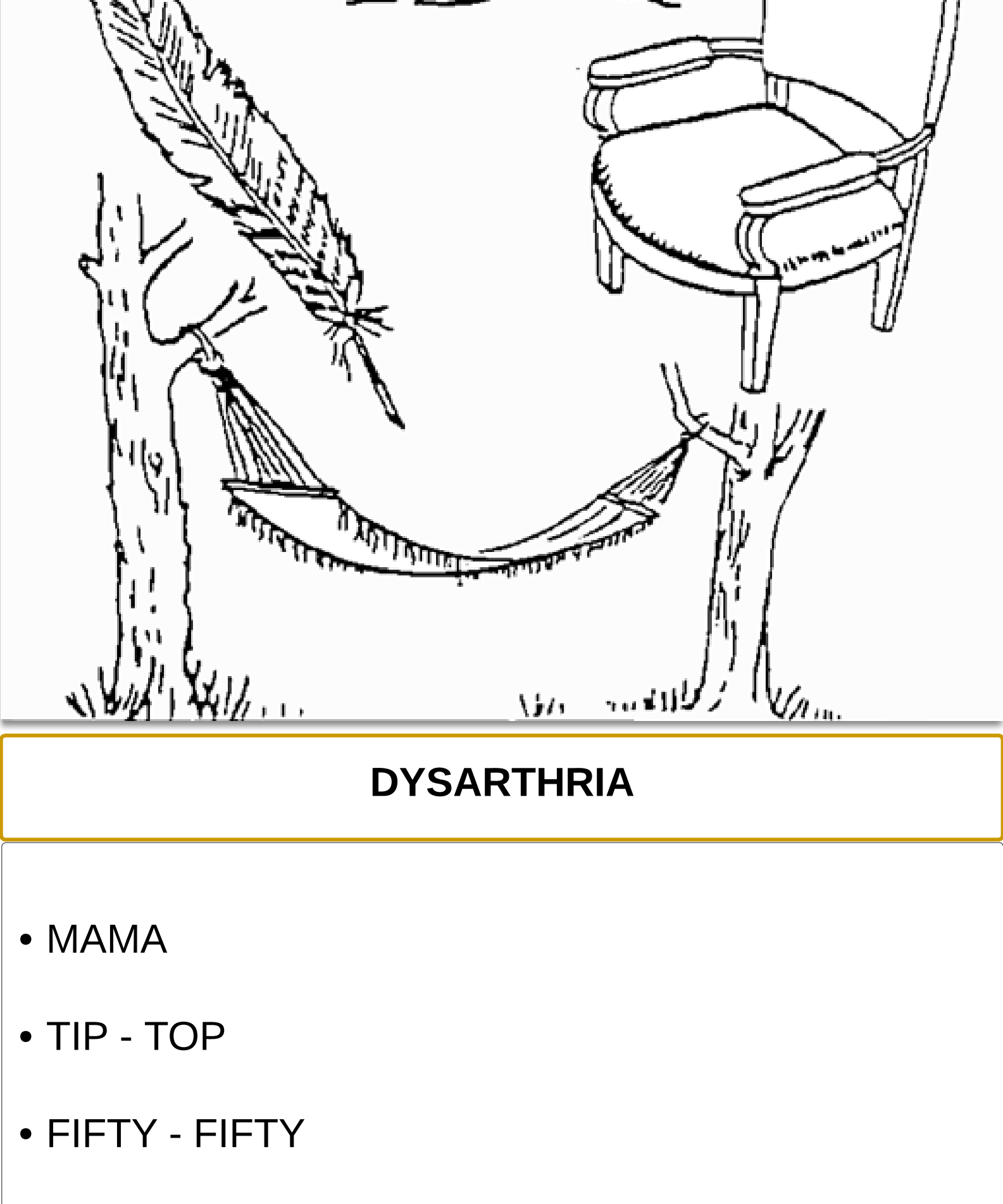
NIHSS predicts stroke severity in the acute setting. Initial and serial scores can be used to predict likely outcome in terms of reaching discharge and levels of independence.

Scoring is complicated by pre-morbid neurological deficit. Users should undergo training on the NIHSS website prior to using this score. Further guidance on scoring in more challenging situations can also be found there.

ADDITIONAL INFORMATION

BEST LANGUAGE

- You know how.
- Down to earth.
- I got home from work.
- Near the table in the dining room.
- They heard him speak on the radio last night.



DYSARTHRIA

- MAMA
- TIP - TOP
- FIFTY - FIFTY
- THANKS
- HUCKLEBERRY
- BASEBALL PLAYER

INTERPRETATION

SCORE	STROKE SEVERITY
0	No stroke symptoms
1-4	Minor stroke
5-15	Moderate stroke
16-20	Moderate / Severe stroke
21-42	Severe stroke

•Patients with a score of ≤4 are highly likely to have good clinical outcomes.

•Patients a score ≥6 are 3 times more likely to be placed in a nursing home + 8 more times likely to require rehabilitation therapy.

•Ischemic stroke patients - for every 1 point increase decreased the likelihood of an excellent outcome by 24% at 7 days and 17% at 3 months.

CALCULATION

Total score = sum of scores for each question

Level of consciousness	Alert	+0
	Arouses to minor stimulation	+1
	Arouses to repeated stimulation	+2
	Movements to pain	+2
	Postures or unresponsive	+3
Ask month and age	Both question correct	+0
	1 question correct	+1
	0 questions correct	+2
	Dysarthric / intubated / trauma / language barrier	+1
	Aphasic	+2
Limb Ataxia	No ataxia	+0
	Ataxia in 1 limb	+1
	Ataxia in 2 limbs	+2
	Does not understand	+0
	Paralysed	+0
	Amputation / joint fusion	+0
Sensation	Normal	+0
	Mild-moderate loss: less sharp / more dull	+1
	Mild-moderate loss: can sense being touched	+1
	Complete loss: cannot sense being touched at all	+2
	No response and quadriplegic	+2
	Coma / unresponsive	+2
Language / aphasia - see information for pictures	Normal	+0
	Mild-moderate aphasia: some obvious changes without significant limitation	+1
	Severe aphasia: fragmentary expression - cannot identify	+2
	Mute / global aphasia	+3
	Coma / unresponsive	+3
Dysarthria - see information for words	Normal	+0
	Mild-moderate dysarthria: slurring but can be understood	+1
	Severe dysarthria	+2
	Mute / anorthic	+2
	Intubated / unable to test	+0
Extinction / inattention	No abnormality	+0
	Visual / tactile / auditory / spatial / personal inattention	+1
	Extinction to bilateral simultaneous stimulation	+1
	Profound hemi-inattention	+2
	Extinction to >1 modality	+2
Blink eyes' & 'squeeze hands'	Performs both tasks	+0
	Performs 1 task	+1
	Performs 0 tasks	+2
Horizontal extraocular movements	Normal	+0
	Partial gaze palsy: can be overcome	+1
	Partial gaze palsy: corrects with oculocephalic reflex	+1
	Forced gaze palsy: cannot be overcome	+2
Visual fields	No visual loss	+0
	Partial hemianopia	+1
	Complete hemianopia	+2
	Patient is bilaterally blind	+3
	Bilateral hemianopia	+3
Facial palsy	Normal symmetry	+0
	Minor paralysis (flat nasolabial fold / smile asymmetry)	+1
	Partial paralysis (lower face)	+2
	Unilateral complete paralysis (upper/lower face)	+3
	Bilateral complete paralysis (upper/lower face)	+3
Left arm motor drift	No drift for 10 seconds	+0
	Drift but doesn't hit bed	+1
	Drift hits bed	+2
	Smoe effort against gravity,	+2
	No effort against gravity	+3
	No movement	+4
	Amputation / joint fusion	+0
Right arm motor drift	No drift for 10 seconds	+0
	Drift but doesn't hit bed	+1
	Drift hits bed	+2
	Smoe effort against gravity,	+2
	No effort against gravity	+3
	No movement	+4
	Amputation / joint fusion	+0
Left leg motor drift	No drift for 5 seconds	+0
	Drift but doesn't hit bed	+1
	Drift hits bed	+2
	Smoe effort against gravity,	+2
	No effort against gravity	+3
	No movement	+4
Right leg motor drift	No drift for 5 seconds	+0
	Drift but doesn't hit bed	+1
	Drift hits bed	+2
	Smoe effort against gravity,	+2
	No effort against gravity	+3
	No movement	+4
	Amputation / joint fusion	+0