VCH and BCEHS Stroke Clinical Pathway – SQUAMISH HOSPITAL August 26 2019 **EHS** Arrives on scene: Performs Stroke Screen (FAST VAN) – Suspected Stroke **YES** NO Symptom onset<6hours OR wake up with symptoms **YES** NO STABLE for transport? STABLE for transport? (Consult CliniCall) (Consult CliniCall) NO YES Stop at Squamish Hospital Transport to Transport to Transport to **Squamish Hospital Lions Gate Hospital Lions Gate Hospital** BCEHS to call site for pre-**Immediately** notification of suspected • BCEHS to call site for BCEHS to call LGH ED Pre-"hot" stroke pre-notification of notification of "hot stroke" if Patient. stays on stretcher suspected stroke FAST(+) BCEHS to call LGH ED for Pre-Rapid triage and notification of "hot stroke with Rapid assessment by site assessment possible large vessel occlusion Physician Follow site based (LVO)" if FAST (+) VAN (+) protocols for care at Advanced Stroke **YES** BCEHS to call LGH ED when 15 Center min away to pre-notify Immediate transport to Stroke Centre? ED to rapidly triage, assess and complete imaging

NO

Site physician to contact PTN/

EPOS to determine transport

option and destination

FAST Test

Secondary transport

required for possible

LVO?

YES

LGH Neurologist

contacts PTN to

arrange LLTO to VGH

Face = Facial Drooping

Arm = Unilateral arm weakness

Speech = Speech impairment

Time = of symptom onset

VAN Test

Vision = right or left gaze
Aphasia = naming difficulties
Neglect = ignoring left side of
body

Transfer Required For:

- Consideration for tPA and/or neurointerventional treatment
- Treatment at a Designated Stroke Centre for ALL stroke patients requiring specialized care – not just for "hot" strokes



NO

Centre

Follow site based

Advanced Stroke

protocols for care at



Legend

BCEHS pathway

In-hospital pathway