

## Robson Valley Corridor Hot Stroke Clinical Pathway

Region: Robson Valley including  
Valemount and McBride  
catchments

**Availability: 24 Hours**

**Direct Transport to  
University Hospital of  
Northern BC (UHNBC) ED**

### Clinical Pathway

## Availability & Assessment

## Inclusion Criteria

## On Scene Requirements

## Transport and Notification

- Identify patient as hot stroke - positive screen on F.A.S.T. assessment: **F**acial droop; **A**rm drift; abnormal **S**peech; **T**ime of symptom onset (last seen normal).
- Time of onset (or last seen normal) **within 6 hours**
- Closest hospital does not have CT scan availability and does not administer TPA.
- Patient able to arrive at UHNBC within **6 hours** from time of onset (or last seen normal) including transport time

- VAN screen for large vessel occlusion: Visual; Aphasia; Neglect.
- Determine blood glucose level
- Establish IV (20 gauge) on route if action will not delay transport;
- Obtain contact number for the most reliable witness / family contact;
- Mandatory** call to CliniCall if transport >90 minutes or if unclear of patient eligibility to confirm appropriate for bypass to UHNBC

- Paramedics to notify UHNBC that they are on route with potential hot stroke patient once direct transport is approved
- 2 hospital pre-notifications will include the following: Hot Stroke Incoming / Patient Name / DOB or PHN / Time of Symptom Onset (last seen normal) in 24hr clock /FAST VAN/ ETA following the SBAR format.
  - ASAP - Pre-registration notification
  - ETA 20 min – Pre-notification of arrival
- If the patient deteriorates on route, divert to nearest hospital or health care facility
- Await instruction from ED staff on arrival

### Note:

- A hot stroke diagnosis and eligibility for thrombolysis or further treatment can be confirmed by expediting access to appropriate CT imaging within a 6 hour therapeutic window.