

Box 1B: Core Information Required by Dispatch, Paramedics and Receiving Healthcare Facility

- Where permitted, limited identifiers such as name, date of birth and/or health card number be provided in order to expedite the registration process.
- Location of patient
- Signs of stroke apparent and visible in patient – including face, arm, speech involvement
- Signs of stroke onset time if witnessed, and last seen well time if not witnessed
- Current condition of the patient having a stroke, and changes in their condition since the stroke symptoms started
- Current medications if known
- Additional health problems, if known
- Collect phone number of witness to verify information
- Advanced care directives if available