



CANADIAN STROKE BEST PRACTICE RECOMMENDATIONS

Acute Stroke Management Seventh Edition, Update 2022

**Box 1B: Core Information Required by Emergency Medical Services
Dispatch, Paramedics and Receiving Healthcare Facility**

*Heran M, Shamy M (Writing Group Chairs)
on behalf of the Canadian Stroke Best Practice Recommendations
Acute Stroke Management Writing Group and in collaboration with the
Canadian Stroke Consortium*

© 2022 Heart and Stroke Foundation of Canada

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

1. Stroke symptom onset time if witnessed, and last known well time if not witnessed
2. Total symptom duration at anticipated arrival in the emergency department
3. Presenting signs of stroke and stroke severity score, based on standardized screening tools
4. Current condition of the patient having a stroke, including previous functional status and independence level, and changes in their condition since stroke symptom onset
5. Current medications (e.g., anticoagulants) if known
6. Advance care plans, if any
7. Expected time of arrival at the receiving hospital
8. Additional health problems, if known

Refer to Section 3 Emergency Medical Services Management of Acute Stroke for additional information.