



CANADIAN STROKE BEST PRACTICE RECOMMENDATIONS

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**Box 3A: Core Information That May Be Required by Dispatch,
Emergency Medical Services, and Receiving Healthcare Facility**

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Acute Stroke Management Writing Group and in collaboration with the
Canadian Stroke Consortium*

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Box 3A Core Information That May Be Required by Dispatch, Emergency Medical Services, and Receiving Healthcare Facility

1. Where permitted, patient name, date of birth, and health card number *Note: In general, this confidential personal health information is not allowed to be transmitted by radio; however, some provinces have received a waiver and had this restriction lifted for emergency cases such as stroke.*
2. Location of patient
3. Stroke symptom onset time if witnessed, and last known well time if not witnessed
4. Total symptom duration at anticipated arrival in the emergency department
5. Presenting signs of stroke and stroke severity score, based on standardized screening tools
6. Current condition of the patient having a stroke, including medical stability, previous functional status and independence level, and changes in their condition since stroke symptom onset
7. Current medications (e.g., anticoagulants) if known, and time taken
8. Advance care plans, if any
9. Expected time of arrival at the receiving hospital, including in scene time
10. Additional health problems, if known