

McLaren Print System Order**Order No: 70312 Reprint Previous Order No: 8205****Order Date: 2022-06-09****User: Valmerice Davis****Phone: 810-342-2203****Ship Location: MCLAREN FLINT
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FLINT , MI 48532****Forms****Quantity: 100****Paragon Dept No: 23012****Dept Name: PLEASE DELIVER TO 2CENTRAL****Company Number: 60****Order Total Price: 20000.00****Item Number: 17841-C****Item Description: Stroke Critical Care Flow Sheet****Revision Date: 9/2021****Print:****Paper:****Size:****Fold:****Finish:****Drill:****Misc Info: 100 per pkg, Color, DS, 2 perfs, 11 x 25.5 flat**

McLaren Flint
STROKE CRITICAL CARE FLOWSHEET

NIH STROKE SCALE ITEM	Scoring Definitions	Date	Time						
1a. LOC	0 = Alert and responsive 1 = Arousable to minor stimulation 2 = Arousable only to painful stimulation 3 = Reflex responses or arousable								
1b. LOC Questions - Ask patient's age and month. Must be exact	0 = Both correct 1 = One correct (or dysarthria, intubated, foreign language) 2 = Neither correct								
1c. Commands - Open/close eyes, grip and release non-parietic hand, (O) for 1-step commands or mimic ok).	0 = Both correct (okay if impaired by weakness) 1 = One correct 2 = Neither correct								
2. Best Gaze - Horizontal EOM by voluntary or Doll's.	0 = Normal 1 = Partial gaze palsy; abn gaze in 1 or both eyes 2 = Forced eye deviation or total paresis which cannot be overcome by Doll's								
3. Visual Field - Use visual threat if necessary. If monocular, score field of good eye.	0 = No visual loss 1 = Partial hemianopia, quadrantanopia, extinction 2 = Complete hemianopia 3 = Bilateral hemianopia or blindness								
4. Facial Palsy - If suporous, check symmetry of grimace to pain.	0 = Normal 1 = Minor paralysis, flat NLF, asym smile 2 = Partial paralysis (lower face = UMN) 3 = Complete paralysis (upper and lower face)								
5. Motor Arm - Arms outstretched 90° (sitting) or 45° (upine) for 10 secs. Encourage best effort. Circle parietic arm in score box.	0 = No drift x 10 secs. 1 = Drift but doesn't hit bed 2 = Some antigravity effort, but can't sustain 3 = No antigravity effort, but even minimal movement counts 4 = No movement at all X = Unable to assess due to amputation, fusion, fx, etc.	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R
6. Motor Leg - Raise leg to 30° supine x 5 secs.	0 = No drift x 5 secs. 1 = Drift but doesn't hit bed 2 = Some antigravity effort, but can't sustain 3 = No antigravity effort, but even minimal movement counts 4 = No movement at all X = Unable to assess due to amputation, fusion, fx, etc.	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R
7. Limb Ataxia - Check finger-nose-finger; heel-shin; and score only if out of proportion to paralysis.	0 = No ataxia (or aphasic, hemiplegic) 1 = Ataxia in upper or lower extremity 2 = Ataxia in upper AND lower extremity X = Unable to assess due to amputation, fusion, fx, etc.	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R	Lor R
8. Sensory - Use safety pin. Check grimace or withhold nail if stuporous. Score only stroke-related losses.	0 = Normal 1 = Mild-mod unilateral loss but patient aware of touch (or aphasic, confused) 2 = Total loss, patient unaware of touch. Coma, bilateral loss								
9. Best Language - Describe cookie jar picture, name objects, read sentences. May use repeating, writing, stereo gnosis.	0 = Normal 1 = Mild-mod aphasia; (different but partly comprehensible) 2 = Severe aphasia; (almost no info exchanged) 3 = Multiple aphasia, coma. No 1 step commands								
10. Dysarthria - Read list of words.	0 = Normal 1 = Mild-mod; slurred but intelligible 2 = Severe; unintelligible or mute X = Intubation or mech barrier								
11. Extinction/Neglect - Simultaneously touch patient on both hands, show fingers in both vision fields, ask about deficit, left hand.	0 = Normal, non detected. (vision loss alone) 1 = Neglects or extinguishes to double simultaneous stimulation in any modality (vis, aud, sens, spatial, body parts) 2 = Pro found neglect in more than on modality								



PT.
MR./RM.