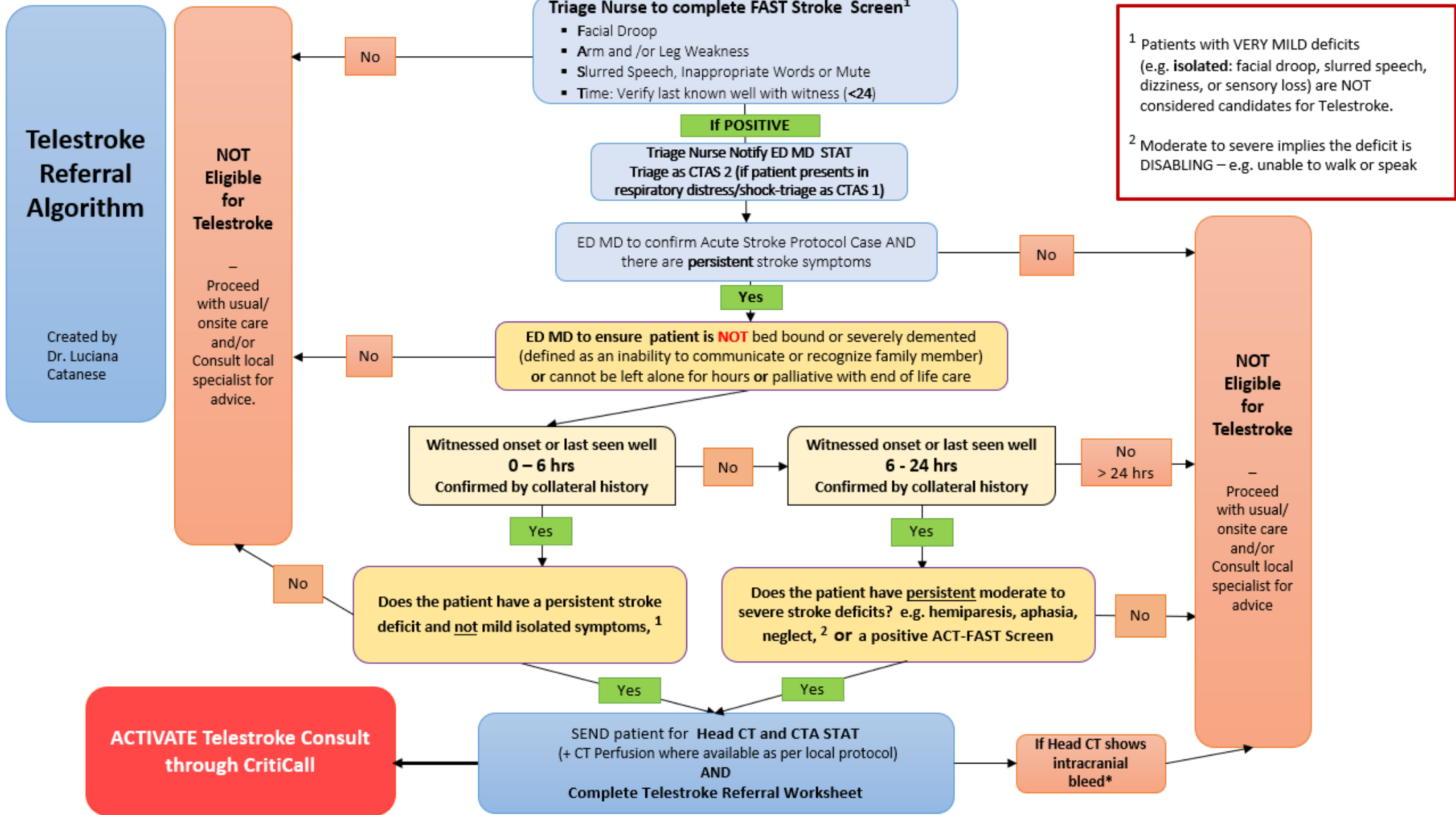


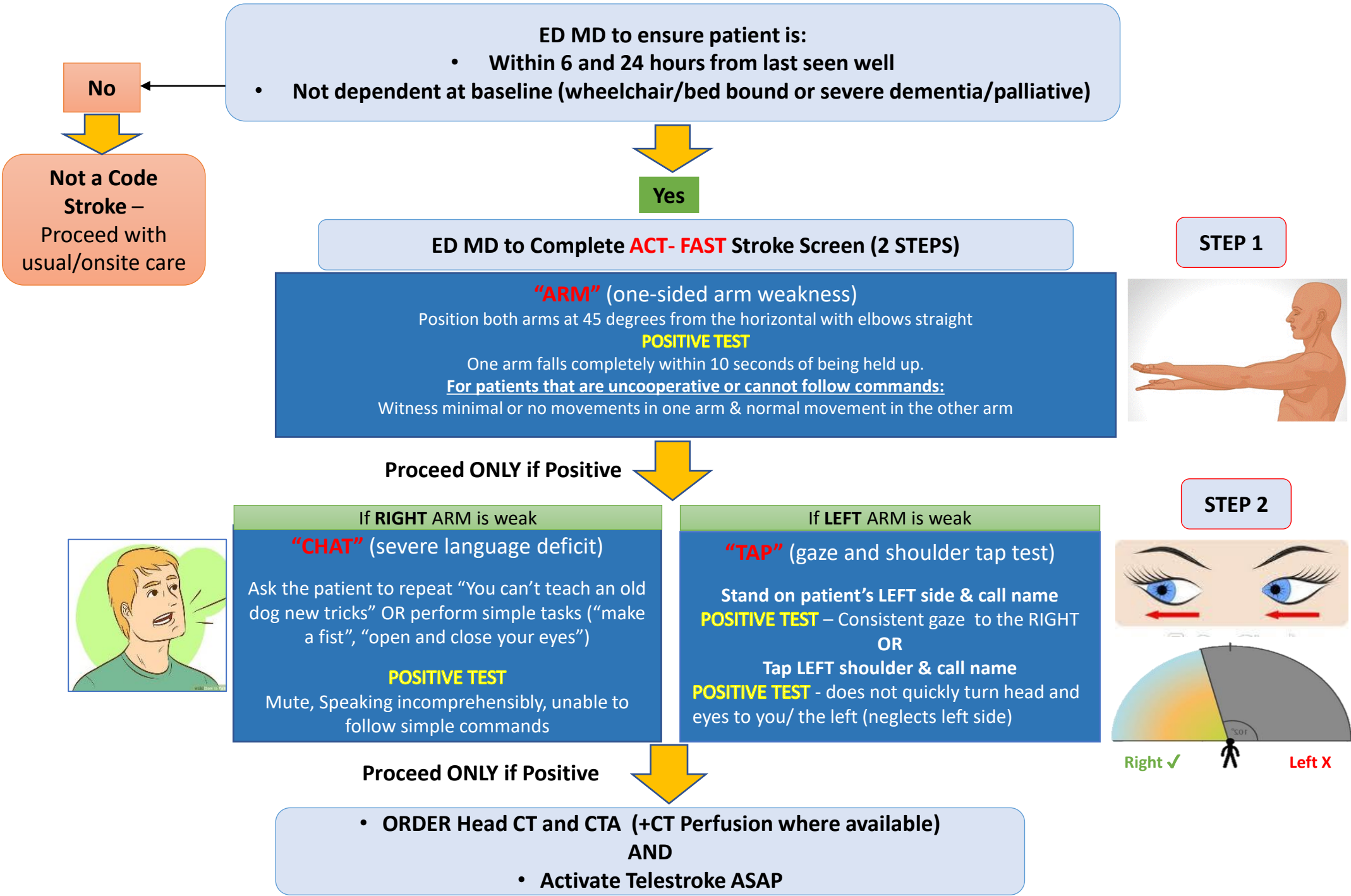
Telestroke: Patient Selection

- The Telestroke Referral Algorithm can be used as a reference
 - ✓ **Look at the exclusions:** > 24 hours, *severe pre-stroke comorbidities, mild isolated deficits (see note 1), and non-disabling deficits (see note 2)*
 - ✓ The ACT-FAST is optional; however, it is helpful in determining which patients have severe neurological deficits and are most likely to have a large vessel occlusion (LVO) on their CTA both required to be eligible for EVT
- Fill out the Telestroke Referral Worksheet **before** calling CritiCall
- If in doubt, call for a Telestroke Consultation



**Note: Do not wait for local radiology to review images prior to calling Telestroke. If your patient meets the selection criteria, please call CritiCall as soon as the patient is on the way to the CT scanner. For patients in the 6 – 24 hours window, If there is a delay in obtaining a CTA, DO NOT call CritiCall until the CTA is in progress.*

**ACT-FAST
STROKE
SCREEN**



REQUIRED PATIENT INFORMATION for Telestroke Consultation

Age / Sex	Times: ED arrival ___ / ___ Last Seen Well: ___ / ___	
History of Bleeding <input type="checkbox"/>	Recent surgery / trauma, biopsy <input type="checkbox"/>	Prior Stroke <input type="checkbox"/> History of AF <input type="checkbox"/>
Medications:		Antiplatelet Agent <input type="checkbox"/> Warfarin <input type="checkbox"/> NOAC <input type="checkbox"/>
EXAMINATION	BP _____ / _____ HR _____	AF on ECG <input type="checkbox"/>
Deficits and severity: describe visual, speech, motor deficits (completed NIHSS not required)		NIHSS _____ (if known)
Referring physician's OHIP Billing Number: _____		