



CENTRAL EAST  
STROKE NETWORK

[www.cesnstroke.ca](http://www.cesnstroke.ca)

SIMCOE DISTRICT



NORTHUMBERLAND HILLS  
HOSPITAL

## ACUTE STROKE TRANSFER PROTOCOL

### Signs consistent with ischemic stroke:

- Unilateral motor weakness (face, arm &/or legs)
- Speech disturbance
- Hemibody sensory loss/weakness
- Sudden visual field changes
- Sudden lack of coordination &/or ability to judge distance or scale

### Stroke symptom onset or last known well **within 4 hours**

**Step 1:** Call dispatch & request urgent hospital transfer as patient fits “**Acute Stroke Protocol**”

**Step 2:** Call PRHC ED Department at: **705-876-5022** & inform them you are transferring an **Acute Stroke Protocol**. Please report BP Systolic >185 and/or Diastolic >110.

**Step 3:** Never delay transfer to complete CT Scan, ECG or Blood Work. It is recommended patient be transferred with Cardiac Monitor, Oxygen Therapy and Large Bore IV (min 18-20 gauge antecubital)

**Step 4:** Fax relevant info to **PRHC ED**  
**Fax: 705 876 5096**

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**Stroke symptom onset or last known well  
within 4-24hrs**

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**Step 1 & 2:** Complete **ACT-FAST**

Observe for one-sided arm weakness

- If R arm weak - proceed to CHAT
- If L arm weak - proceed to TAP

**Notify ED Physician**

**Step 3:** ED physician to complete NIHSS & EVT eligibility criteria

**Step 4:** If ACT FAST positive. **Activate Stroke EVT Orderset** and proceed to immediate imaging (Target: within 15 min of arrival)

**Step 5:** Complete Patient Information & Medication section on **EVT Transfer Communication Form.**

**Step 6:** ED physician contacts **CritiCall** for consult with **Stroke Endovascular Team.**

**Step 7:** If patient accepted, **EVT order set** and **EVT Transfer Communication Form** to be completed. Offer *Patient & Family brochure* if appropriate.

**Step 8:** Need for medical escort will be determined as per the CorHealth EVT Referral & Transport memo as well as in collaboration with referring MD & local EMS