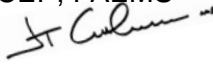




Advisory 23-06: FAST-ED

To: All EMS Agencies and Providers

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Regional Medical Director 

Date: July 19, 2023

Large Vessel Occlusion (LVO) strokes are often not amenable to fibrinolytics and benefit by embolectomy. Stroke Severity Scores have been developed to help identify those individuals having a stroke that have a high likelihood of that stroke being due to an LVO.

We recognize that no Stroke Severity Score is perfect – all have varying sensitivities and specificities. In consultation with area hospitals and stroke centers, and in consideration of other NYS regions using stroke severity scores, the FAST-ED stroke severity score is recommended for use in the MLREMS region after the EMS practitioner has identified a stroke using either the Cincinnati Prehospital Stroke Scale or their clinical judgement.

Training on how to perform the FAST-ED is available through Collaboration at <https://collaboration.net/course/24335>.

There is no expectation at this time of EMS practitioners using a FAST-ED score in and of itself to route (divert) patients to a specific facility. However, a FAST-ED score ≥ 4 **may**, along with clinical judgement, warrant transport to a Comprehensive Stroke Center (in MLREMS this is Rochester General and Strong Memorial Hospitals) provided that transport is equal or less than (in time) to arrival at the nearest primary stroke center. EMS Practitioners should continue to use their clinical judgement to transport the patient to the most appropriate stroke center and engage Medical Control as a resource to determine the most appropriate destination for the patient.

Practitioners are strongly encouraged to use a phone-based application to aid in the determination of the FAST-ED score. The NYS DOH MURU application does not have this option, and MLREMS does not endorse a specific application, however there are many available freely. Alternatively, the scoring chart (attached and available at: <https://mlrems.org/training>) may be used.

If a FAST-ED score is obtained, it is expected to be documented in the ePCR. For emsCharts users, information on how to document that is attached.

With any questions, please do not hesitate to contact this office.

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FAST-ED

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| | |
|------|---|
| Face | Facial Weakness |
| | 0 Both sides of the face move equally or not at all |
| | 1 One side of face droops or is clearly asymmetrical |

| | |
|-----|---|
| Arm | Arm Weakness |
| | 0 Both arms remain up for 10 seconds |
| | 1 One arm drifts down, but can be lifted against gravity |
| | 2 No effort against gravity or no movement |

| | |
|--------|---|
| Speech | Point out/show three common items and ask to name them |
| | 0 Speech normal AND names 2-3 items correctly |
| | 1 Abnormal speech OR only names 0-1 objects correctly |
| | Ask "Show me two fingers" |
| | 0 Shows two fingers |
| | 1 Cannot understand / does not show two fingers |

| | |
|------|---|
| Eyes | Eye Deviation |
| | 0 No deviation, eyes move to both sides equally |
| | 1 Difficulty looking to one side (left or right) |
| | 2 Eyes are deviated to one side and do not move to the other |

Continue only if there is arm weakness

| | |
|------------------|--------------------------------------|
| Denial / Neglect | Ask "Are you weak anywhere?" |
| | 0 Recognizes weakness |
| | 1 Does not recognize weakness |
| | Ask "Whose arm is this?" |
| | 0 Recognizes weak arm |
| | 1 Does not recognize weak arm |

emsCHARTS Agencies

Agency Administrators

MLREMS Commands: FAST-ED is live and ready for use

Non-MLREMS Commands: FAST-ED must be activated in your command configuration. In the Stroke Scales code table, select FAST-ED and all of the appropriate values will automatically be selected.

emsCHARTS Users/Field Clinicians

To document FAST-ED, please utilize the options on the Neuro Assessment.

Step 1: Click the Stroke Scale dropdown and select a FAST-ED option.

The screenshot shows the 'Neuro' section of the emsCHARTS interface. The 'Stroke Scale' dropdown menu is open, and a red arrow points to it. The form includes fields for 'Level of Consciousness', 'Mental Present/Not Present', 'Neurological Present/Not Present', 'Time Last Known Well', 'Comments', 'Stroke/CVA Symptoms Resolved', 'Patient chemically paralyzed', 'Loss of Consciousness', and 'Was Pt. Immobilized'. There are also sections for 'Initial Glasgow Coma Score' and 'Airway'.

Step 2: The Stroke Scale button will then appear and can be selected.

The screenshot shows the 'Neuro' section of the emsCHARTS interface. The 'Stroke Scale' dropdown menu is now set to 'FAST-ED Positive', and a red arrow points to the 'Stroke Score' button that has appeared next to it. The form includes fields for 'Level of Consciousness', 'Mental Present/Not Present', 'Neurological Present/Not Present', 'Time Last Known Well', 'Comments', 'Stroke/CVA Symptoms Resolved', 'Patient chemically paralyzed', 'Loss of Consciousness', and 'Was Pt. Immobilized'. There are also sections for 'Initial Glasgow Coma Score' and 'Airway'.

Step 3: Complete the FAST-ED dropdowns.

Neurological Present: 

Neurological Not Present:

Time Last Known Well: 

cores - Google Chrome

com/pr/strokescale_score.cfm?prid=79924152&scale_id=30

| Stroke Scale Values | |
|--|--------------------------------|
| FAST-ED Positive | |
| Arm Weakness: | <input type="text"/> |
| Denial/Neglect: | <input type="text"/> |
| Eye Deviation: | <input type="text"/> |
| Facial Palsy: | <input type="text"/> |
| Speech Changes: | <input type="text"/> |
| Total: | <input type="text" value="0"/> |
| <input type="button" value="Save"/> <input type="button" value="Close"/> <input type="button" value="Delete"/> | |

Step 4: Complete the rest of your ePCR. In the Entire Chart view, you can preview your neurological assessment.

| Neurological Exam | |
|--|---------------------------|
| Level of Consciousness: Responds to Pain | Loss of Consciousness: No |
| Chemically Paralyzed: No | |
| Stroke Scale: FAST-ED Positive Score: 5 | |
| Facial Palsy: 1, Speech Changes: 2, Eye Deviation: 1, Denial/Neglect: 0, Arm Weakness: 1 | |
| Time Last Known Well: 03/27/2023 09:15 | |