

STROKE SCALE FLOWSHEET

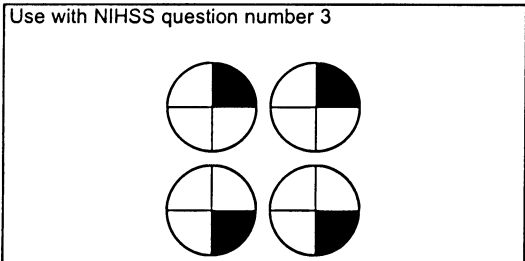
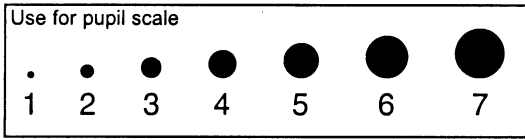
National Institute of Health Stroke Scale (NIHSS)

A complete NIH Stroke Scale score consists of all 11 elements of the NIH Stroke Scale. A modified NIH Stroke Scale score consists of asterisk (*) items 1, 4, 5, 6 (unshaded areas). Pupil exam may be ordered in addition to the NIH Stroke Scale, but is not included in the NIH Stroke Scale score. GCS is NOT included on Stroke Scale Flowsheet, but ordered separately.		DATE	ADMIT SCORE				
		TIME					
LEVEL OF CONSCIOUSNESS	*1a. Level of consciousness	0 = alert 1 = drowsy but arousable 2 = stuporous 3 = coma					
	*1b. Level of consciousness questions (month, age)	0 = answers both correctly 1 = answers one correctly 2 = both incorrect					
	*1c. Level of consciousness commands (1. open, then close eyes 2. make fist, then let go)	0 = performs both correctly 1 = performs one correctly 2 = both incorrect					
VISION	2. Best gaze (ability to follow examiner s finger across horizontal plane)	0 = normal 1 = partial gaze palsy 2 = forced deviation					
	3. Visual (visual stimulus to patient s visual field quadrants - see diagram on back of form)	0 = no visual loss 1 = partial hemianopsia 2 = complete hemianopsia 3 = bilateral hemianopsia (blind)					
MOVEMENT	*4. Facial palsy (shows teeth, raise eyebrows, squeeze eyes shut)	0 = normal 1 = minor asymmetry upon smiling, flattened nasiolabial fold 2 = partial, total or near total paralysis of lower face 3 = complete absence of movement in upper and lower face					
	*5a. Motor arm - left *5b. Motor arm - right (extends arms with palms down to 90 degrees if sitting, 45 degrees if supine and hold for 10 seconds - score drift/movement) Explain: _____	0 = no drift for 10 seconds 1 = drift, does NOT hit bed 2 = some effort against gravity, limb drifts to bed 3 = no effort against gravity, limb falls to bed, some movement 4 = no movement NT = amputation, joint fusion (explain) _____	L				
			R				
	*6a. Motor leg - left *6b. Motor leg - right (while supine, hold leg at 30 degrees for 5 seconds - score drift/movement) Explain: _____	0 = no drift for 5 seconds 1 = drift, does NOT hit bed 2 = some effort against gravity, limb drifts to bed 3 = no effort against gravity, limb falls to bed, some movement 4 = no movement NT = amputation, joint fusion (explain) _____	L				
			R				
	7. Limb ataxia (finger to nose, heel down shin)	0 = absent or affected limb too weak to perform exam 1 = present in one limb 2 = present in two limbs					
SENSORY	8. Sensory (pin prick to face, arm, trunk and leg - compare side to side)	0 = normal 1 = mild to moderate loss not as sharp 2 = severe loss, total sensory loss, patient unaware of being touched					
LANGUAGE	9. Best language (name items, describe a picture and read sentences - see reverse side for use of words and pictures to aide in assessment)	0 = no aphasia 1 = mild to moderate aphasia, examiner can identify picture from patient response 2 = severe aphasia, examiner CANNOT identify pictures from patient response NT = mute, no useable speech					
	10. Dysarthria (evaluate speech clarity by patient repeating listed words - see reverse side for use of words to aide in assessment) Explain: _____	0 = normal 1 = mild, slurs some words 2 = severe, slurred speech, unintelligible or mute NT = intubated or other physical barrier (explain) _____					
	11. Extinction and inattention (use information from prior testing to identify neglect or double simultaneous stimuli testing - modality: visual, tactile/auditory, spacial)	0 = normal 1 = inattention or extinction in one modality 2 = profound hemi-attention or hemi-inattention in more than one modality					
EYES	Pupil exam (see reverse side for diagram of mm) Not included in NIH Stroke Scale score Reactive = R Nonreactive = N	Size	L				
		Reaction	L				
		Size	R				
		Reaction	R				
		Total: Modified NIHSS score					
		Total: 0-42 Complete NIHSS score					
		Initials					

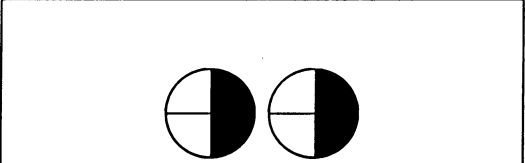


ALEXIAN BROTHERS
Medical Center

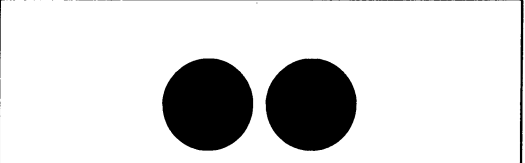
800 Biesterfield Road
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Stroke Scale Flowsheet
National Admission of Health Scale (NIHSS)
Form # 6165001 (2/10/05) Page 1 of 2



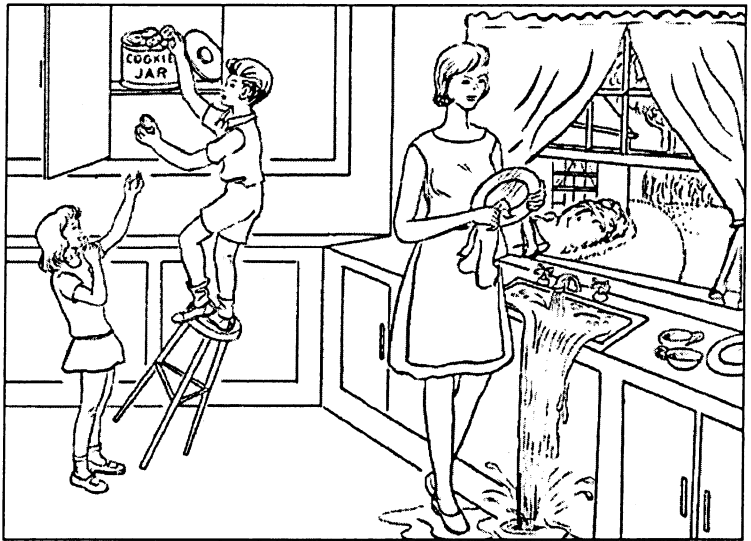
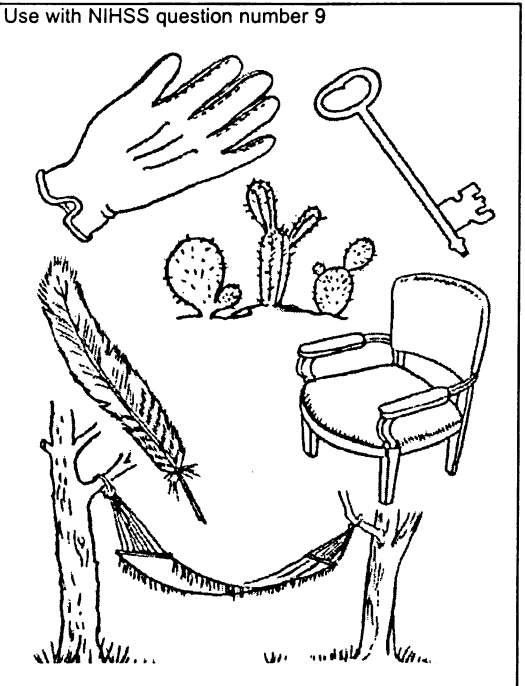
Partial hemianopia



Complete hemianopia



Total blindness



Use with NIHSS question number 9

**You know how.
Down to earth.
I got home from work.
Near the table in the
dining room
They heard him speak
on the radio last night.**

Use with NIHSS question number 10

**MAMA
TIP-TOP
FIFTY-FIFTY
THANKS
HUCKLEBERRY
BASEBALL PLAYER**



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