

HISTORY AND PHYSICAL EXAM

STROKE: Emergency Medical Stroke Assessment (EMSA)

- Last time patient was seen normal or last known well time.
- Existing previous neurologic deficit.
- Stroke risk factors (hypertension, diabetes, heart disease, smoking, dysrhythmias, blood thinner use, or previous stroke).
- Has the patient had any recent similar events?
- Level of consciousness: Alert, Responds to Voice, Responds to Pain, Unconscious.

Perform the **Emergency Medical Stroke Assessment (EMSA)**:

1. **Eyes:** Horizontal Gaze

- Ask patient to keep their head still and follow your finger left to right with their eyes. In aphasic patients, call the patient's name on one side and then the other.
- Abnormal – Patient is unable to follow as well in one direction compared to the other.

2. **Motor:** Facial Weakness

- Ask patient to show their teeth or smile. In aphasic patients, look for asymmetric grimace to pain.
- Abnormal – One side of the face does not move as well as the other.

Arm Weakness

- Ask patient to hold out both arms, palms up, for 10 seconds with eyes closed. In aphasic patients, hold the patients arms up and let go.

- Abnormal – One arm does not move, or drifts down compared to the other.

Leg Weakness

- Ask patient to lift one leg and then the other for 5 seconds. In aphasic patients, hold up one leg and let go, then repeat on the other side.

- Abnormal – One leg does not move, or drifts down compared to the other.

3. **Slurred Speech or Aphasia:**

Naming

- Ask patient to name your watch and pen.
- Abnormal – Patient slurs words, says the wrong words, or is unable to speak.

Repetition

- Ask patient to repeat “They heard him speak on the radio last night” after you.
- Abnormal – Patient slurs words, says the wrong words, or is unable to speak.

If any component of the EMSA stroke scale is abnormal, the patient is very likely to be suffering from an acute stroke.