



Acute Stroke Workflow - Busselton Hospital

TRIAGE NURSE ASSESSMENT

B.E.F.A.S.T. POSITIVE: one or more B.E.F.A.S.T. (Balance, Eyes, Face, Arm, Speech, Thunderclap headache) symptoms present *or resolved*. =ATS 2. Immediately alert ED Coordinator if B.E.F.A.S.T. positive / suspected stroke.

ED DOCTOR RAPID ASSESSMENT

- Stabilise and examine patient
- Obtain Stroke Pack
- Verify clear focal neurology (including time of onset)
- Appropriate bedside investigations (including BSL) and IV Access
- NIHSS Assessment MR62F in Stroke Pack
- Request immediate CT "Stroke Protocol" – notify radiographer
- Call FSH to notify of impending consult (Do not wait for CT results)
- NOTE: If on clinical assessment patient is deemed to have experienced a TIA and NOT a stroke, please use Bunbury Hospital TIA Management Tool.

IMAGING: "Stroke Protocol" CT / CTA (Aortic arch to Circle of Willis). Upload to WA PACS

FIONA STANLEY HOSPITAL (FSH) TELE-STROKE CONSULTATION

- Phone **Stroke Consultant** M-F 8am – 5pm (or Stroke Reg. if unavailable)
 - Discuss suitability for clot retrieval / thrombolysis.
 - Discuss suitability for transfer to tertiary sites vs local management.
 - Discuss suitability for neurosurgical Intervention
- ***WACHS Medical staff can request to escalate to FSH Neurology Registrar after hours if required

FSH Stroke Consultants: 0466 329 729
FSH Stroke Registrar: 6152 7667
A/Hours FSH Registrar: 6152 2222

YES

POTENTIAL FOR METROPOLITAN MANAGEMENT?

ED NURSING TASKS:

- Initiate Stroke Protocol MR62B
- Initiate Swallow Assessment MR64B
- Facilitate Transfer to CT/ CTA

ED DOCTOR

Document in BOSSnet time of call, metropolitan hospital contacted, Doctor (name and designation) & advice received

NO

TRANSFER METROPOLITAN HOSPITAL

Criteria:

- Thrombolysis
- Clot retrieval
- Neurosurgery or
- Medical management

- Provide Consumer brochure on PIARS for clot retrieval and / or thrombolysis
- Note: Clot retrieval M-F 8am-5pm **FSH** or Clot retrieval 24/7 **SCGH**

TRANSFER BUNBURY

Criteria:

- Acute stroke care
- Potential thrombolysis
- Imaging required
- Complex co-morbidities
- Stroke Rehabilitation

ADMIT BUSSELTON

Criteria:

- Palliative care
 - Previous Strokes
 - TIA management
- Commence Stroke Protocol MR62B OR follow TIA Management Tool

DISCHARGE

Criteria:

- Non-urgent TIA management on FSH advice
- Consider referral to SW Low Risk TIA Clinic

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