

FINGER LAKES REGIONAL EMS COUNCIL, INC.



EMERGENCY MEDICAL SERVICES

in affiliation with Finger Lakes Community College

To: All Agencies and Providers
From: Finger Lakes Regional Emergency Medical Advisory Committee
Date: September 18th, 2018
Re: Diversion of embolectomy candidates
Advisory #: 18-0918b

At the last Finger Lakes Regional EMS Council REMAC meeting there was discussion about the diversion of transporting ambulance to facilities that could provide symptomatic stroke patients with embolectomy.

It is the opinion of the Finger Lakes Regional EMS Council REMAC that beginning October 1, 2018, EMS providers making Stroke Alert notifications to any of the FLREMS Stroke Centers via phone or radio may be asked questions about a gaze preference or gaze deviation being present on their patient's clinical exam. This call should be made as soon as possible after identifying positive stroke findings.

Gaze abnormalities may be significant when assessing the potential stroke patient, specifically when combined with positive findings from the Cincinnati Prehospital Stroke Scale (CPSS). The presence of all elements of the CPSS and a gaze abnormality suggests a large vessel occlusion and may benefit by embolectomy which is available at only two area hospitals. Thus, **at the discretion of Medical Control**, you may be asked to divert to an embolectomy capable facility if clinical findings are concerning for a large vessel occlusion stroke.

You may only divert to embolectomy capable facility if you receive a direct order to do so from a Medical Control doctor. You must document this order as you would any on-line medical order in your Chart.

For those using emsCharts you should make two "Add Action" entries on Page 8. The first will be the "Hosp. Notify" documenting the Stroke alert to the facility and the second will be a "Medical Consult" documenting the order to divert to another facility. You must include the name of the doctor giving you the order.

MLREMS created a short (7 minute), online video which is available at <https://youtu.be/lu1OsiVaelo>. It will review the assessment of both gaze preference and gaze deviation. There is no CME associated with

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this short video, but all providers are encouraged to review the material and learn this simple yet important assessment for stroke.

There are no additional changes to the expectations for stroke care within the FLREMS region.

This advisory supersedes and replaces all previous advisories regarding Stroke assessments and diversion based on the assessment.

If you have any questions regarding this REMAC Advisory you may contact the Program Agency Coordinator at 315-789-0108 or by e-mail at pac@flremsc.org.

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