NORTH Dakota | Health
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Patient label

NIH STROKE SCALE IN PLAIN ENGLISH

			Y / N	Y / N	Y / N	Y / N	Y / N
Sedating medications affecting scale? (Circle Y or N) →							
Date / Time / Initials →							
1a. Level of Consciousness	0= Alert 1= Sleepy but arouses 2= Can't stay awake 3= No purposeful response						
1b. Questions (month, age)	0=Both correct 1=One correct /intubated 2=Neither correct						
1c. Commands (Close eyes, make fist)	0= Obeys both 1= Obeys one 2= Obeys neither						
2. Lateral Gaze (Eyes open. Eyes follow examiners fingers/face side-to-side)	0= Normal side-to-side eye movement 1= Partial side-to-side eye movement 2= No side-to-side eye movement						
3. Visual Fields (Both eyes open, count 1/2/5 fingers/detect movement, 4 visual fields	0= Normal visual fields ⊕ 1= Blind upper **or** lower field one side. 2= Blind upper **&** lower field one side. 3= Blind in both eyes/4 fields ●						
4. Facial Weakness (Smile/grimace, raise eyebrows, squeeze eyes shut)	0= Normal 1= Mild one-sided droop with smile 2= Obvious droop at rest 3= Upper **&** lower face weak						
5a. Arm Weakness– Left **5b. Arm Weakness– Right** (Pt. holds arm at 90^0 if sitting, 45^0 if supine for 10 sec.)	0= No drift X=Untestable-joint fused/amp 1= Drifts down, does not hit bed 2= Drifts down to hit bed 3= Can move but can't lift 4= No movement	Lt. Rt.					
6a. Leg Weakness– Lt **6b. Leg Weakness– Rt** (Pt. holds leg straight out if sitting, 30^0 if supine) 5 sec.	0= No drift X= Untestable, joint fused, etc. 1=Drifts down, does not hit bed 2= Drifts down to hit bed 3= Can move but can't lift 4= No movement	Lt. Rt.					
7. Coordination Finger-to-nose, heel-to-shin. Score <u>only</u> if not caused by weakness.	0= Normal or **no movement** 1= Clumsy in one limb 2= Clumsy in two limbs						
8. Sensation (feeling) (Pin prick face, arm, leg – compare sides)	0= Normal 1= Decreased sensation 2= Can't feel, no pain withdrawal						
9. Speech (content) Intubated pt can write. Give blind pt objects to name. (name objects, describe cookie picture)	0= Correct full sentences 1= Wrong or incomplete sentences 2= Words don't make sense 3= Can't speak at all						
10. Speech (slurring) Slurring. (Listen to patient read/repeat words)	0= No slurring X= Intubated/physical barrier 1= Slurs but you can understand 2= Slurs and you can't understand **<u>or</u>** mute						
11. Neglect (Ignores one side of body; test vision then test touch on both sides at once)	0= Sees & feels when both sides tested at once. 1= Doesn't see **<u>or</u>** feel one side when tested at once 2= Doesn't see **<u>&</u>** feel one side when tested at once						
Total Score:							

Date & time	Signature	Date & time	Signature	Date & time	Signature

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NIHSS Scoring Tips

1. **Level of consciousness/questions/commands.** Use patient-appropriate questions, commands:
    - Use voice then touch to wake sleeping patient. May require vigorous stimulation.
    - Intubated or otherwise unable to speak give score of 1.
    - Person with one arm amputated and the other paralyzed can wiggle their toes.

2&3. **Eye movement and visual fields**:
    - If patient cannot open eyes, examiner may gently lift lids open for exam.
    - Test both eyes at same time for movement and fields.
    - May roll patient's head side to side if not following (occulocephalic maneuver).

4, 5, 6. **Facial and extremity strength**:
    - If patient not following commands, examiner may show patient what to do (ie, lift arm) for patient to mimic or maintain position.
    - Test each side separately to avoid confusing neglect for weakness.

7. **Limb coordination (ataxia):**
    - Only score if patient is able to move the limb, and the precision of movement is abnormal out of proportion to weakness.

8. **Sensation**:
    - Test arm and leg; many people have numb hands (carpal tunnel) and feet (diabetic neuropathy).

9. **Language**:
    - Testing for cognitive content of speech—naming objects, fluent sentences.

10. **Slurring (dysarthria):**
    - Testing for clarity of speech—the actual motor function of getting the words out.

11. **Neglect (Inattention or extinction):**
    - Can patient pay attention to stimuli on both sides at the same time?
    - Must have some vision in both fields to test: if scores 2 on #3 (visual fields), cannot score visual neglect.
    - Must have some sensation on both sides to test: if scores 2 on #8 (sensation), cannot score sensory neglect.
    - If patient does not acknowledge one side of space (does not recognize own arm when held in their good visual field; does not acknowledge they have any problem with a paralyzed side, etc), score is 2.