

11. What are atypical stroke symptoms?

- A Falls, confusion and unilateral weakness
 B Sudden onset of a severe headache with confusion
 C Impaired consciousness, confusion and falls
 D Sudden onset of speech problems with neurological symptoms

12. Choose the correct statements with regards to emergency dispatch and response of the EMS:

- A Protocols to manage stroke patients effectively, initial assessment and treatment should be carried out, all tests and investigations should be performed before the patient is transported to the facility
 B Clear protocols to manage a stroke patient effectively, initial assessment and treatment should be carried out rapidly and only essential tests and investigations should be performed
 C Clear protocols to manage a stroke patient effectively, initial assessment and treatment should be carried out rapidly, only essential tests and investigations should be performed to ensure the patient is transported to the facility without any delays
 D Initial assessment and treatment should be carried out rapidly and only essential tests and investigations should be performed before transferring the patient to the appropriate hospital

13. Which tools can be used to recognise a stroke as well as to determine the severity of a stroke?

- A Los Angeles Pre-hospital Stroke Screen
 B FAS test
 C NIH Stroke Scale
 D All of the above

14. What components make up the Los Angeles Pre-hospital Stroke Screen tool?

- A Speech impairment, arm weakness and grip strength
 B Left and right leg motor, gaze and language
 C Facial weakness, arm strength, blood glucose and grip
 D All of the above

15. Is the statement true or false? Ischaemic strokes involving the posterior circulation as well as intracerebral bleeding or subarachnoid haemorrhage may require immediate airway management, especially if the patient has an altered level of consciousness?

- A True
 B False

16. What is the reasoning for using stroke scales/assessments in the pre-hospital phase of stroke management?

- A These assessments raise the accuracy of stroke identification
 B They help EMS identify stroke symptoms quickly
 C They increase the sensitivity of identifying a stroke
 D All of the above

17. What additional components to the FAST test does the FAST-ED scale look at?

- a There is scoring system for each component of the FAST-ED test
b It looks at receptive aphasia, eye deviation and denial or neglect
c It has a higher predictive value for large vessel occlusions

Choose the correct option:

- A a and b
 B b and c
 C c and b
 D a, b and c

18. What is the maximum score, as well as the variance, for the NIHSS for patients to be eligible for thrombolysis?

- A 40, 6-22 points
 B 38, 6-20 points
 C 42, 6-22 points
 D 42, 4-20 points

19. What does NIHSS stand for?

- A New India Health Stroke Score
 B Nobody In Hospitals Sees Strokes
 C National Institute of Health Stroke Scale
 D National Institute of Hospitals' Stroke Scale

20. If a patient is given a score of 2 for section 2 "Best Gaze" on the NIHSS, it means:

- A The patient has partial gaze palsy, gaze is abnormal in one or both eyes, but forced deviation or total gaze paresis is not present
 B Forced deviation, or total gaze paresis not overcome by the oculoccephalic manoeuvre
 C Patients gaze is normal

21. If a patient is given a score of 1 for section 4 "Facial Palsy" on the NIHSS, it means:

- A Normal symmetrical movements
 B Minor paralysis
 C Partial paralysis
 D Complete paralysis

22. If a patient is given a score of 1 for section 6 "Motor leg" on the NIHSS, it means:

- A Drift – Leg falls by the end of the 5 second period, but does not hit the bed
 B Some effort against gravity, leg falls to bed by 5 seconds, but has some effort against gravity
 C No effort against gravity
 D No movement

23. If a patient is given a score of 2 for section 8 "Sensory" on the NIHSS, it means:

- A Normal, no sensory loss
 B Mild to moderate sensory loss
 C There was loss of superficial pain with pinprick
 D Patient is in a coma/has severe to total sensory loss

24. If a patient is given a score of 1 for section 10 "Dysarthria" on the NIHSS, it means:

- A The patient is intubated
 B The patient has such severe slurred speech as to be unintelligible
 C Patient slurs at least some words and, at worst, can be understood with some difficulty
 D Patient has normal speech

25. If a patient is given a score of 0 for section "Extinction and Inattention" on the NIHSS, it means:

- A No abnormality
 B Visual tactile, auditory, spatial or personal inattention or extinction to bilateral simultaneous stimulations in one of the sensory modalities
 C Profound hemi-attention or extinction to more than one modality, does not recognise own hand or orients to only one side of space

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26. What is the EMS role upon first medical contact?

- A Timely stroke symptoms recognition B Pre-notification
 C Rapid transport to a designated stroke centre D All of the above

27. In choosing a hospital, the most appropriate hospital can provide patients with...

- A Recanalisation therapy and stroke unit care B CT scan
 C Swallowing assessment D All of the above

28. Which of the following is more appropriate to treat a stroke patient in the acute phase?

- A A comprehensive stroke centre B A primary stroke centre C An acute stroke facility D All of the above

29. According to the guidelines, how much time should be spent on scene?

- A >5 minutes B <5 minutes C <15 minutes D >15 minutes

30. To do as much as possible before arrival at the hospital will include the following:

- A Checking oxygen saturation B Checking the patient's blood pressure
 C Establishing IV access D Checking the patient's glucose levels
 E All of the above

31. In training paramedics in stroke assessment, it enables them to identify _____ % of strokes?

- A 56–67 B 66–77 C 76–87 D 86–97

32. The ABCDE approach was developed as a way to prioritise the order of assessment and treatment of trauma patients.

- A True B False

33. Partial airway obstruction is not always immediately obvious. Therefore, clinical observation should ensure early detection of any increased respiratory effort or abnormal breathing sounds.

- A True B False

34. According to the American Stroke Association, cardiac monitoring should be performed for the first _____ hours.

- A 12 B 24 C 36 D 72

35. Persistent in-hospital hyperglycaemia during the first 24 hours after a stroke is associated with a worse outcome than normoglycaemia.

- A False B True

36. Abrupt blood pressure lowering, by a paramedic, should be avoided in a stroke patient.

- A True B False

37. The stroke patient's body must be elevated to _____ °.

- A Stroke patient must lie flat, no elevation. B 30° C 80°

38. Which of the following statements are true?

- A Start two large bore IV access B Transport should not be delayed if establishing IV access is going to waste time
 C A and B D None of the above

39. Blood glucose testing is important for the following reasons:

- A Hypoglycaemia could mimic stroke B Pre-existing hyperglycaemia worsens the clinical outcome of acute stroke
 C All of the above D None of the above

40. What is the most important reason to get a clear relevant medical history of the stroke patient?

- A To rule out stroke mimics
 B To give a thorough handover to the emergency unit
 C To determine the patient's risk for bleeding

41. Studies have shown that pre-notification leads to:

- A Shorter symptom onset-to-hospital arrival B Increase in the amount of patients with door-to-imaging times within 25min
 C Lower onset-to-door times observed D All of the above

42. Please review stroke patient video 1–4 and diagnose the patient using FAST (indicate deficit(s) present).

- I. Video 1:**
 A Face B Arm C Speech D All of the above
- II. Video 2:**
 A Face B Speech C Arm, speech D Face, speech
 E All of the above
- III. Video 3:**
 A Face B Speech C Arm, speech D Face, speech
 E All of the above
- IV. Video 4:**
 A Face B Speech C Arm, speech D Face, speech
 E All of the above