Large Artery Stroke Screening Forms for VAN + Protocol

1. **How weak is patient on one side of body?**
   If patient shows no weakness then CTA not urgent. Patient is VAN negative.
   - □ Mild (minor drift) *(hold both arms up for 10 seconds)*
   - □ Moderate (severe drift - touches or nearly touches ground)
   - □ Severe (flaccid or no antigravity)
   - □ Patient shows no weakness. Patient is VAN negative. CTA not urgent. *(exception are confused or comatose patient’s with dizziness, focal findings or no reason for their altered mental status then Basilar artery thrombus must be considered, CTA is warranted)*

2. **Visual Disturbance?**
   - □ Field Cut (which side) *(4 quadrants)*
   - □ Double vision (ask patient and look to right then left, evaluate for uneven eyes)
   - □ Blind new onset
   - □ NONE

3. **Aphasia?**
   - □ Expressive (inability to speak or errors) *don’t count slurring of words* *(repeat & name 2 objects)*
   - □ Receptive (not understanding or following commands) *(close eyes, make fist)*
   - □ Mixed
   - □ NONE

4. **Neglect?**
   - □ Forced gaze or inability to track to one side
   - □ Unable to feel both sides at same time, or unable to identify own arm
   - □ Ignoring one side
   - □ NONE

*All VAN positive patients should be sent to endovascular capable hospital & notified ahead of time. NeuroIR paged w VAN positive patient arriving. CT/CTA done on arrival.*

If patient has **any weakness PLUS any one of the below:**
- Visual Disturbance (field cut, double, or blind vision)
- Aphasia (inability to speak or understand)
- Neglect (gaze to one side or ignoring one side)

This is likely a large artery clot (cortical symptoms) = VAN Positive