# BACK TO BASICS: USING ABCD<sup>2</sup> SCORE TO ASSESS STROKE RISK IN TIA

### ABCD<sup>2</sup> - RISK SCORE

Symptom	Score 1 point			
Age >60 years				
Blood pressure ≥140/90 mmHg	1 point			
Clinical neurological deficit	2 points for weakness or 1 point for speech problem			
Duration	2 points for >60 minutes 1 point for 10-60 minutes			
Diabetes	1 point			

#### **Episodes:**

More than one in the last week = high risk refer for TIA assessment in the next 24 hours

#### ABCD<sup>2</sup> - TIA action plan

Unless contraindicated, start aspirin 300 mg once daily Must not drive for one month, or until proved not to be a TIA

#### **ACTION ON SCORE**

ABCD<sup>2</sup> score ≥4: TIA assessment in the next 24 hrs

ABCD<sup>2</sup> score <4: TIA assessment in the next 7 days

Crescendo TIA (2 or more TIAS in week): assessment in next 24 hours even if score <4

#### Rita's 'funny do'

RITA, aged 75 years, is attending for her flu jab and mentions that she had a 'funny do' this morning. On enquiry she says that her left arm felt heavy and tingly. The feeling spread up to the left side of her face and she was dribbling her tea.



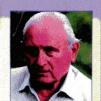
She sat down and rested, and after no more than five minutes, everything was back to normal. Her speech was not affected. Her BP is 130/80 mmHg. and she is not diagnosed as having diabetes. She says she hasn't had another 'funny do' since.

Her ABCD<sup>2</sup> score is 3, so she is prescribed 300 mg aspirin daily. and advised not to drive for a month. She is referred for a TIA assessment, which needs to be within the next 7 days.



#### Harry

HARRY is a 68-year-old chap who comes to surgery at 8.30 in the morning very upset; you are asked to squeeze him into your list. He has a heavy right arm and the right side of his face is weak and this makes his speech difficult.



He has been like this since he got up this morning - over an hour ago. He is not diabetic and his BP is 138/70 mmHg.

#### TREAT AS STROKE

This is not TIA but is potentially a stroke. When symptoms are present, treat as a stroke:

- Call 999
- · Take his blood sugar while you wait
- Do NOT give aspirin. You would have no idea if he can swallow or whether the stroke is due to a bleed or a blockage so aspirin could do more harm than good.

## Bob: three episodes of slurred speech

BOB is 58 years old and attends an afternoon appointment, which he made yesterday.

He reports three separate episodes of slurred speech over the weekend, each lasting about 15 mins. He can't remember any arm weakness but was more concerned about his speech so may not have noticed. He is not diabetic and his blood pressure today is 135/69 mmHa.

His ABCD<sup>2</sup> score is only 2, but he has had more than one episode in the last week so he is potentially at high risk of a stroke.

He is given 300 mg aspirin and advised not to drive for one month and a faxed referral is sent to have Bob assessed at the rapid access TIA clinic in the next 24 hours.



# Mavis: weakness and slurred speech

MAVIS is 71 years of age. Her husband rings the practice for a home visit. When you arrive, she is making a cup of tea saying that he shouldn't have made such a fuss.



The problem was that she had weakness down her left side and slurred speech, which lasted for a good half hour. Today, her blood pressure is 150/92 mmHg. and she is not diabetic.

Her ABCD<sup>2</sup> score is 5 so she is given 300 mg aspirin and advised not to drive for one month. A faxed referral is sent to have Mavis assessed at the rapid access TIA clinic in the next 24 hours.



## **NEUROVASCULAR / TIA CLINIC REFERRAL FORM**

	REFER	RRAL D	ETAILS				
Name of Referrer			Date of 1st Contact	adhimiyy			
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Contact Telephone Number							
Contact relephone Hamber	inibei		Date of Referral	d-izmm/yy			
Source of Referral	ED / MAU / GP / OTHER		Time of Referral	hn:mm (24 hrs clock)			
	PATI	TAILS					
Title	Miss / Mrs / Mr / Other Address Line 1			·			
Forename(s)		A	Address Line 2				
Surname		A	Address Line 3				
Sex	M/F		Postcode				
Date of Birth	odham/y <sub>2</sub>		Telephone Number home)				
NHS Number			Telephone Number mobile)				
Registered GP:		F	Practice Code				
	PATIE	ENT HIS	TORY				
Date of Symptoms	admrtívy Details						
	damn-yy		O:	etails			
	adiromky	0		etais			
	dti/atts/yy	Details					
Recurrent events?	Yes / No	If so w	hen and how many?				
Measure	RISK FACTOR  Definition Points Score						
Age	≥ 60 years	1					
Blood pressure	Systolic BP ≥140 mm Hg OR Dia	1					
Clinical features of TIA (choose one)	Unilateral weakness with or without speech impairment OR			2			
	Speech impairment without unilateral weakness			1			
Duration	TIA duration ≥ 60 minutes			2			
	TIA duration 10-59 minutes	1					
Diabetes		1					
	Total ABCD <sup>2</sup> score	0-7					
	CLINICIAN INSTRUCTIONS						
Score of "4" or more Whilst still with Patient, telephone the ASU Co-Ordinator for appointment and give Patient Information							
	Leaflet.						
Score of "3" or less	Your patient will receive an appointment within 7 days						
	Please start aspirin 300mg od immediately  If aspirin intolerant consider clopidogrel 75mg od as an alternative						
Current Drug Therapy:	Please specify: - If on Aspirin at time of event and/or other antiplatelet drug(s)						
	If on Warfarin: WHY?  MOST RECENT INR:						
Please circle any known							
additional risk factors:	carotid disease, impaired LV fund				Condition - Manufacture State Condition -		
Please ensure you inform Patient NOT to drive prior to their appointment							
ASU Co-Ordinator 24 hours <b>01254 263555 &amp; ask for Bleep 387</b>							
After speaking with the ASU Co-Ordinator, please ensure you fax the Referral Form within 20 minutes							
IA Fax Number (24 hours) 01254 736378							
FOR ASU TEAM OFFICE USE							
Referral Received Date	* 1 1 2		Referral Received Time	1 12 an	· North s		
Appointment Date			ppointment Time				
Scan Date	P	S	Scan Appointment Time	μ	21 120		

## **NEUROVASCULAR / TIA CLINIC REFERRAL PROCESS**

