

Transient Ischaemic Attack (TIA)

Score patient using ABCD2 criteria.

- The two main advantages of urgent referral of TIAs with a score of 4 or more are early intervention and investigations & access to thrombolysis in the highest risk first 24 hours.
- If the patient has neurological signs still present at the time of assessment, they are likely to have had a stroke. Please send them to the Emergency Department for admission.
- Patients with recurrent TIAs who have been previously investigated should be discussed with medical consultant or referred for an urgent outpatient appointment.

ABCD2 score for Stroke Risk After TIA

Criteria	Score	Score
Age >60 years	1	
Blood Pressure (after TIA) >140 syst and/or >90 diast	1	
Clinical Features (maximum 2) Unilateral weakness (objective loss of power face/limb, not subjective "heaviness" etc); or Speech disturbance without weakness; And/or Other (e.g. facial weakness, sensory loss)	2 1 0	
Duration of Symptoms	< 10 mins 10-59 mins > 1 hour	0 1 2
Diabetes Yes	1	
Total Score	0 - 7	

Stroke Risk & Referral Table

Score	Risk	Risk of Stroke	Action
0-3	Low	1% at 2 days 1.2% at 7 days 3.1% at 90 days	GP care Arrange carotid U/S
4-5	Moderate	4.1% at 2 days 5.9% at 7 days 9.8% at 90 days	Admit or urgent referral & carotid U/S
6-7	High	8.1% at 2 days 11.7% at 7 days 17.8% at 90 days	Admit & carotid U/S

All patients:

- Please start Aspirin 100 – 300 mg unless contra-indicated.
- If recent dyspepsia or PMH peptic ulcer disease cover with PPI, e.g. Omeprazole 20mg daily.
- Non-contrast CT scan (ideally < 24 hours). Copy of report to Tim Matthews & Annabel Reed.
- Refer patient to Stroke Field Officer and give patient a Stroke Foundation information package.

Transient Ischaemic Attack (TIA) Referral Form

Fax form to: 06 946 9830

Patient Details:

Name:

Address:

NHI:

Contact Details:

Next of kin:

Referring GP:

History including current presentation:

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Current medications: Please list

Allergies: