

NIH STROKE SCALE



NIH STROKE SCALE ASSESSMENT [NIHSS]

CATEGORY		0	1	2	3	4	*UN	SCORE
1A. LEVEL OF CONSCIOUSNESS <i>Awake, driving, unresponsive, etc.</i>		Alert	Responsive	Responsive	Unresponsive			
1B. LOC QUESTIONS: <i>Are month and age.</i>		Both correct	One correct	Neither correct				
1C. LOC COMMANDS: <i>Open and close eyes, make a fist and let go.</i>		Both correct	One correct	Neither correct				
2. BEST EYE: <i>Eyes open, patient follows examiner's finger to face.</i>		Normal	Partial gaze palsy	Fixed deviation				
3. VISUAL: <i>Introduce visual stimulus or threat to patient's visual field (pointers). Cover eyes & hold up fingers in all 4 quadrants.</i>		No visual loss	Partial hemianopia	Complete hemianopia	Homonymous hemianopia (blind)			
4. FACIAL PALSY: <i>Smile, frown, raise eyebrows, and close eyes tightly.</i>		Normal	Mild palsy	Partial palsy	Complete palsy			
5. MOTOR ARM: <i>Evaluate extremity to 90 degrees and score movement. Count to 5 and touch and use fingers for visual cue.</i>	A. LEFT ARM	No drift	Drift	Some effort against gravity	No effort against gravity	No movement	Amputation, Joint fusion	
	B. RIGHT ARM	No drift	Drift	Some effort against gravity	No effort against gravity	No movement	Amputation, Joint fusion	
6. MOTOR LEG: <i>Evaluate extremity to 90 degrees and score movement. Count to 5 and touch and use fingers for visual cue.</i>	A. LEFT LEG	No drift	Drift	Some effort against gravity	No effort against gravity	No movement	Amputation, Joint fusion	
	B. RIGHT LEG	No drift	Drift	Some effort against gravity	No effort against gravity	No movement	Amputation, Joint fusion	
7. LIMB ATAXIA: <i>Finger to nose, heel to shin test.</i>		Normal	Present in one limb				Amputation, Joint fusion	
8. SENSORIUM: <i>Pin prick to face, arms, trunk and legs (compare quadrants).</i>		Normal	Mild to moderate loss					
9. BEST LANGUAGE: (Refer to attachment) <i>Describe picture, name items, and read list of sentences. Test with glasses if normally used.</i>		No aphasia	Mild to moderate aphasia					
10. DYSARTHRIA: (Refer to attachment) <i>Evaluate speech clarity by patient reading or repeating words on the list.</i>		Normal speech	Mild to moderate dysarthria					
11. EXTENSION AND INATTENTION: <i>Information from prior testing or double simultaneous stimuli testing to identify neglect. Face, arms, legs, and visual fields.</i>		No neglect	Partial neglect	Complete neglect				
SCORE: (*UN: UN-TESTABLE)		0	1-4	5-15	16-20	21-42		
STROKE SEVERITY:		No stroke	Minor stroke	Moderate stroke	Mild to severe	Severe stroke	TOTAL SCORE:	



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