Patient Name_____ Unit #_____ Date___/___/___ **TOTAL**=

Date/Time of Stroke Onset_____ Stroke Type_____ Examiner _____

NIH STROKE SCALE ITEM	Scoring Definitions	Score
1a. LOC	0=alert and responsive 1=arousable to minor stimulation 2=arousable only to painful stimulation 3=reflex reponses or unarousable	
1b. LOC Questions--Ask pt's age and month. Must be exact.	0=Both correct 1=One correct (or dysarthria, intubated, foreign lang) 2=Neither correct	
1c. Commands--open/close eyes, grip and release non-paretic hand, (Other 1-step commands or mimic ok)	0=Both correct (ok if impaired by weakness) 1=One correct 2=Neither correct	
2. Best Gaze--Horizontal EOM by voluntary or Doll's.	0=Normal 1=partial gaze palsy; abnl gaze in 1 or both eyes 2=Forced eye deviation or total paresis which cannot be overcome by Doll's.	
3. Visual Field--Use visual threat if nec. If monocular, score field of good eye.	0=No visual loss 1=Partial hemianopia, quadrantanopia, extinction 2=Complete hemianopia 3=Bilateral hemianopia or blindness	
4. Facial Palsy--If stuporous, check symmetry of grimace to pain.	0=Normal 1=minor paralysis, flat NLF, asymm smile 2=partial paralysis (lower face=UMN) 3=complete paralysis (upper & lower face)	
5. Motor Arm--arms outstretched 90 deg (sitting) or 45 deg (supine) for 10 secs. Encourage best effort. Circle paretic arm in score box	0=No drift x 10 secs 1=Drift but doesn't hit bed 2=Some antigravity effort, but can't sustain 3=No antigravity effort, but even miminal mvt counts 4=No movement at all X=unable to assess due to amputation, fusion, fx, etc.	L or R
6. Motor Leg--raise leg to 30 deg supine x 5 secs.	0=No drift x 5 secs 1=Drift but doesn't hit bed 2=Some antigravity effort, but can't sustain 3=No antigravity effort, but even miminal mvt counts 4=No movement at all X=unable to assess due to amputation, fusion, fx, etc.	L or R
7. Limb Ataxia--check finger-nose-finger ; heel-shin; and score only if out of proportion to paralysis	0=No ataxia (or aphasic, hemiplegic) 1=ataxia in upper or lower extremity 2= ataxia in upper AND lower extremity X=unable to assess due to amputation, fusion, fx, etc.	L or R
8. Sensory--Use safety pin. Check grimace or withdrawal if stuporous. Score only stroke-related losses.	0=Normal 1=mild-mod unilateral loss but pt aware of touch (or aphasic, confused) 2=Total loss, pt unaware of touch. Coma, bilateral loss	
9. Best Language--Descr ibe cookie jar picture, name objects, read sentences. May use repeating, writing, stereognosis	0=Normal 1=mild-mod aphasia; (diff but partly comprehensible) 2=severe aphasia; (almost no info exchanged) 3=mute, global aphasia, coma. No 1 step commands	
10. Dysarthria--read list of words	0=Normal 1=mild-mod; slurred but intelligible 2=severe; unintelligible or mute X=intubation or mech barrier	
11. Extinction/Neglect-- simultaneously touch patient on both hands, show fingers in both vis fields, ask about deficit, left hand.	0=Normal, none detected. (vis loss alone) 1=Neglects or extinguishes to double simult stimulation in any modality (vis, aud, sens, spatial, body parts) 2=profound neglect in more than one modality	