



**Central Iowa EMS Directors
Des Moines Metro STROKE & STEMI Task Force**

RACE STROKE SCALE

Patient Name: _____

DOB: _____ Date: _____

RACE STROKE SCALE

ITEM	Instruction	Result	Score
Facial Palsy	Ask patient to show their teeth (smile)	Absent (symmetrical movement) Mild (slight asymmetrical) Moderate to Severe (completely asymmetrical)	0 1 2
Arm Motor Function	Extending the arm of the patient 90° (if sitting) or 45° (if supine)	Normal to Mild (limb upheld more than 10 seconds) Moderate (limb upheld less than 10 seconds) Severe (patient unable to raise arm against gravity)	0 1 2
Leg Motor Function	Extending the leg of the patient 30° (in supine)	Normal to Mild (limb upheld more than 5 seconds) Moderate (limb upheld less than 5 seconds) Severe (patient unable to raise leg against gravity)	0 1 2
Head & Gaze Deviation	Observe eyes and head deviation to one side	Absent (eye movements to both sides were possible and no head deviation was observed) Present (eyes and head deviation to one side was observed)	0 1
Aphasia (R side)	Difficulty understanding spoken or written words. Ask patient to follow two simple commands: 1. Close your eyes. 2. Make a fist.	Normal (performs both tasks requested correctly) Moderate (performs only 1 of 2 tasks requested correctly) Severe (Cannot perform either task requested correctly)	0 1 2
Agnosia (L side)	Inability to recognize familiar objects. Ask patient: 1. "Whose arm is this?" (while showing the affected arm) 2. "Can you move your arm?"	Normal (recognizes arm, and attempts to move arm) Moderate (does not recognize arm or is unaware of arm) Severe (does not recognize arm and is unaware of arm)	0 1 2
RACE SCALE TOTAL			

Any score above a "5" is a Stroke Alert and high likelihood of an LVO