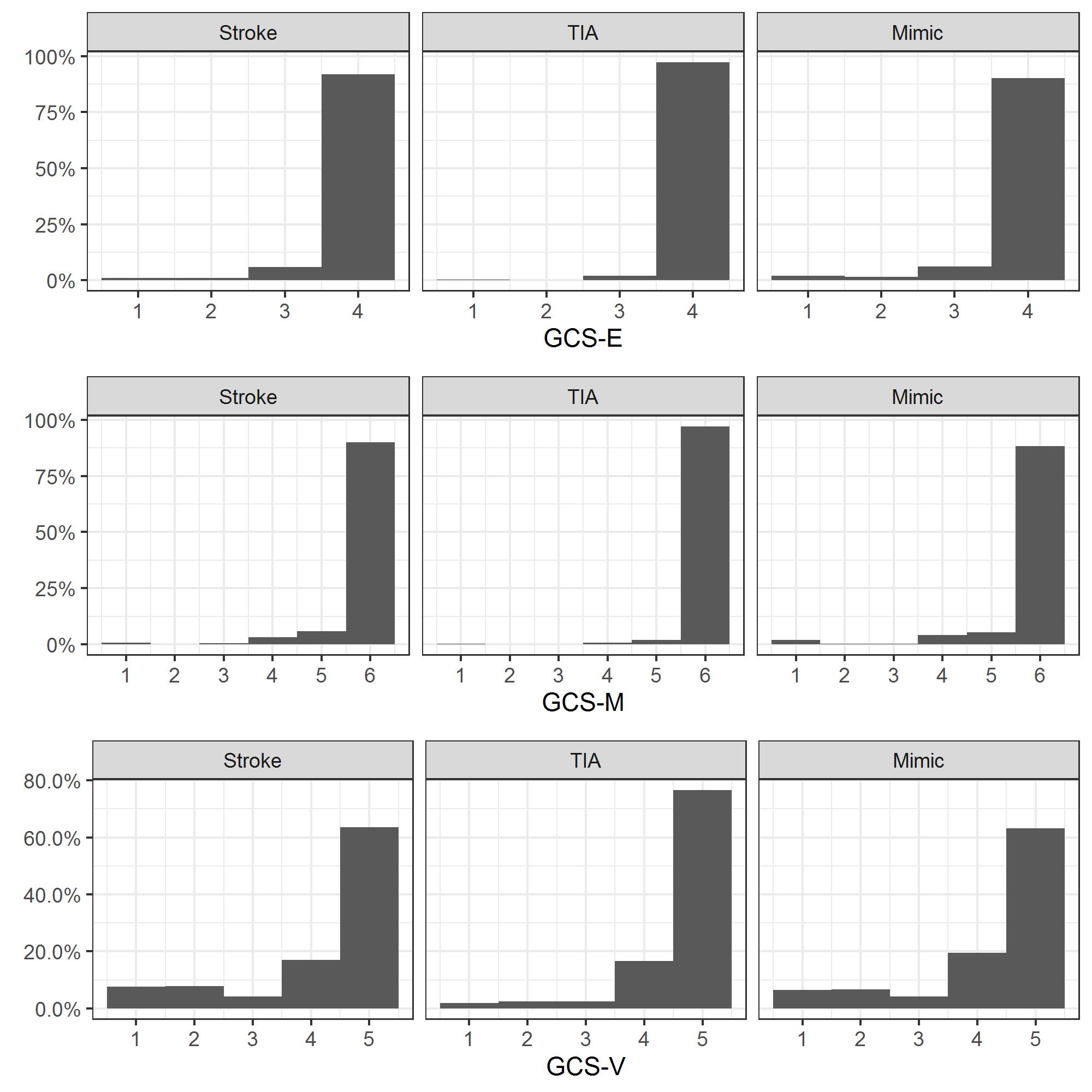
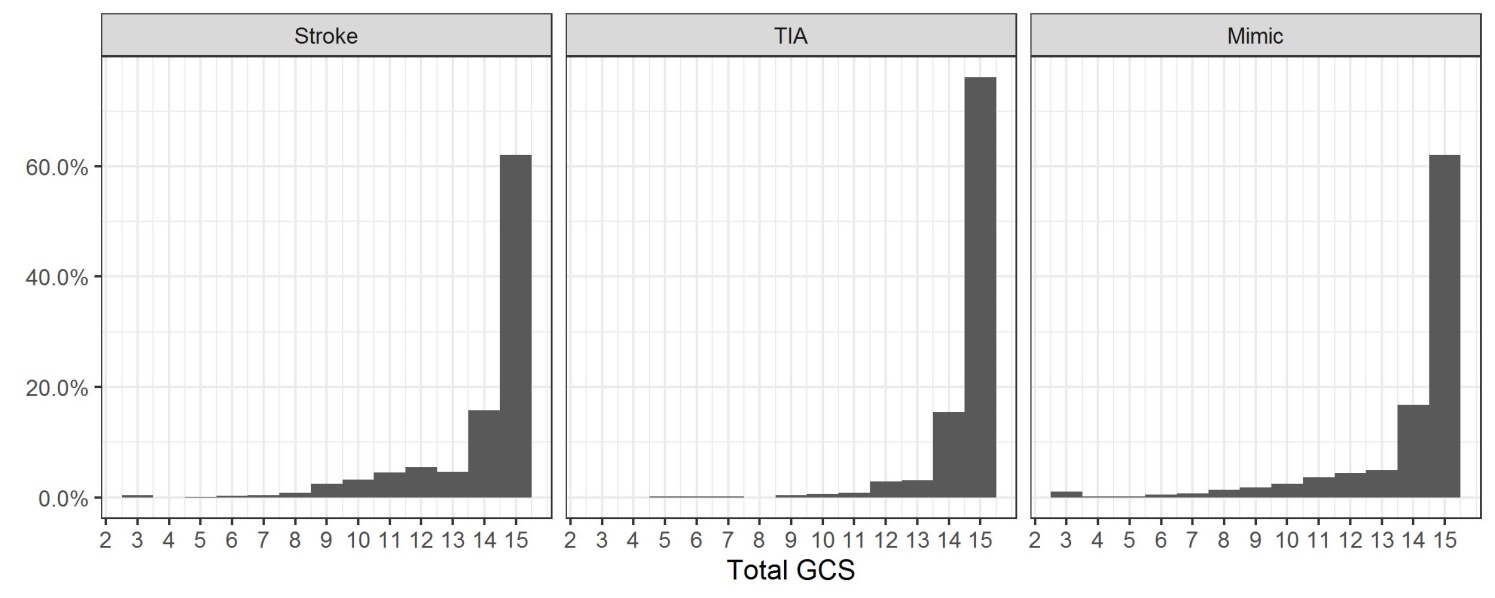
Supplementary Material

# Supplementary Figures and Tables

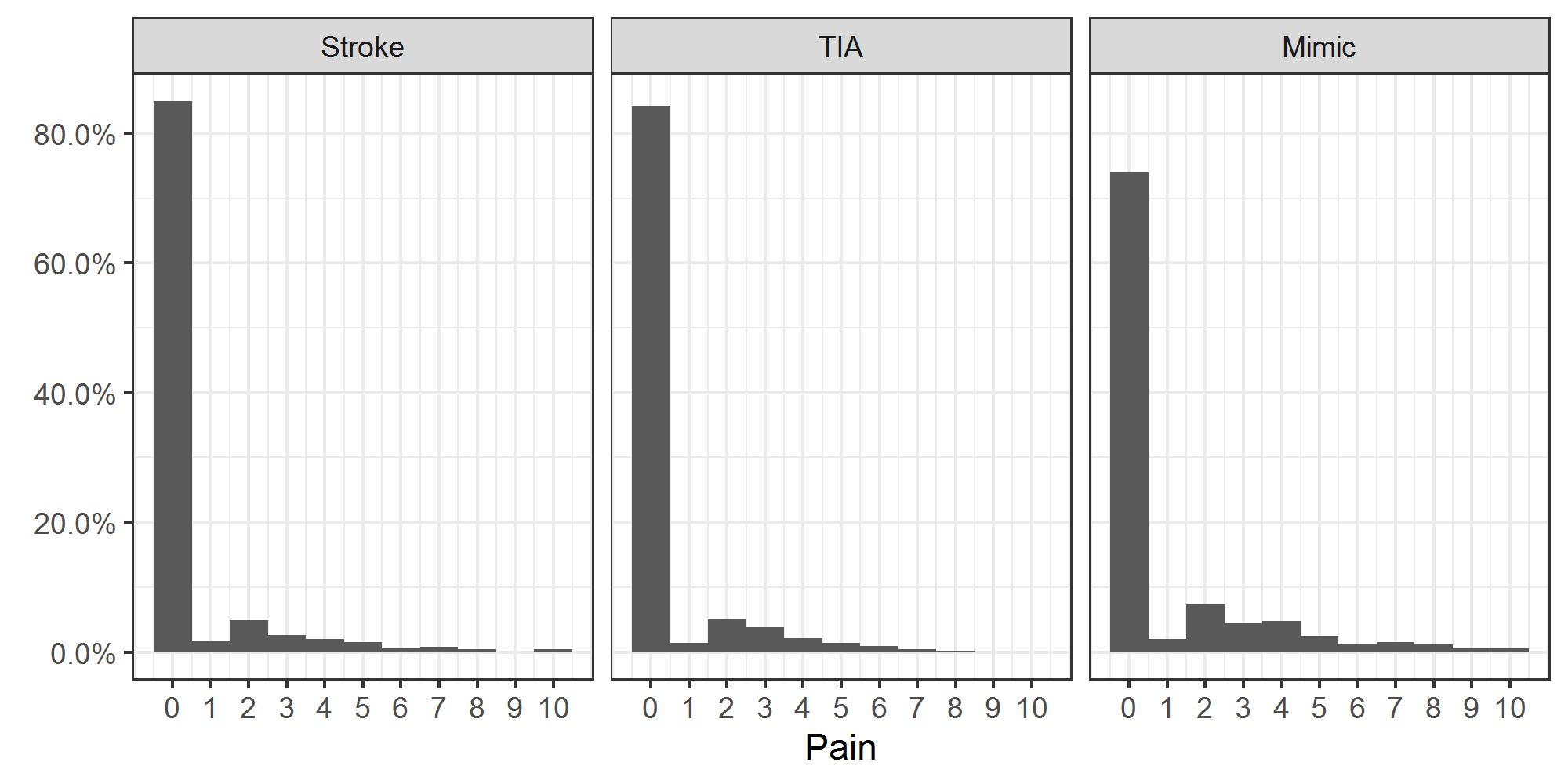
## Supplementary Figures



**Supplementary Figure S1.** Distribution of elements of GCS recorded prehospital for suspected strokes, categorized by final diagnosis of stroke, TIA and mimics.



**Supplementary Figure S2.** Distribution of total GCS recorded prehospital for suspected strokes, categorized by final diagnosis of stroke, TIA and mimics.



**Supplementary Figure S3.** Distribution of pain score recorded prehospital for suspected strokes, categorized by final diagnosis of stroke, TIA and mimics.

## Supplementary Tables

**Supplementary Table S1**: Full description of variables recorded in the patient record form

|  |  |  |
| --- | --- | --- |
| **Category** | **Field** | **Notes** |
| Previous History | PMH ischemic heart disease | Include angina, previous MI |
| PMH atrial fibrillation or flutter | Prior history of atrial fibrillation, atrial flutter. Includes permanent and paroxysmal |
| PMH hypertension | Documented as high blood pressure or hypertension |
| PMH diabetes | Documented as type 1 or 2 diabetes mellitus |
| PMH Epilepsy | Prior history of epilepsy. Include any patient with a prior history of seizures. Do not include if incident is first ever seizure. |
| PMH Stroke or TIA | Prior history of stroke or TIA, do not include current incident |
| PMH Migraine | Prior history of migraine, with or without aura. Do not include if only says ‘headaches’ |
| PMH Dementia | Prior history of any type of dementia |
| PMH Mental health | Prior history of any mental health condition eg: depression, anxiety, psychosis, schizophrenia but NOT dementia |
| Substance misuse | Mark yes if any prior or incident related drug abuse |
| Alcohol misuse | History of any prior or incident related excessive or problematic alcohol use |
| Other symptoms:  as part of presenting incident (include things that patient reports but have resolved or not objectively seen by the paramedic) | Unilateral leg weakness | Unilateral leg weakness or drift downwards with gravity |
| Reduced mobility/ Unable to mobilise | Documented inability or difficulty with standing or walking whatever the reason, including unilateral leg weakness |
| Unsteadiness/ ataxia | Documented to be unsteady, have poor balance or be ataxia which may be leading to reduced mobility or immobility |
| Visual disturbance/ changes | Any disturbance of vision including double vision / diplopia, visual field loss, loss of vision in one or both eyes. Do **not** include gaze deviation noted on examination. |
| Gaze deviation | Gaze deviation gaze deviation’, ‘staring/looking/gazing to left/right’ ‘eyes fixed to left/ noted on examination’ |
| Seizures | Include if documented seizure(s) as part of the incident. Include if described as ‘seizure’, ‘fit’, or if loss or altered consciousness with limb shaking. |
| Vomiting | Any vomiting as part of incident, record as no if nausea only |
| Difficulty swallowing | Coughing or choking on eating or drinking, or any other change in swallowing |
| Dizziness | Dizziness or vertigo |
| Leaning to one side | Noted to be leaning or slumped to one side as main complaint |
| Fall | Any fall from sitting or standing |
| Headache | Headache as part of current incident, regardless of prior history |
| Loss of consciousness | Complete loss of consciousness as part of current incident, regardless of whether recovered before paramedics arrive or en route to hospital |
| Generalised weakness | General weakness of all 4 limbs, if worse on one side mark ‘N’ and record as arm and/or leg weakness |
| Memory loss | Any amnesia around time of incident, either prompting the call or noted by paramedics |
| Behavioral changes | Any noted alteration in behavior not meeting other symptoms in list |
| Confusion | Clear new onset confusion, clouding of consciousness, lack of attention |
| Loss/ change in sensation | Loss of/ change in feeling anywhere in body as part of current incident eg numbness, paraesthesia |

**Supplementary Table S2**: Patients that died within 30 days of admission, broken down by ambulance pathway adherence, area and final diagnosis

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | OOA suspected strokes | | | Local suspected strokes | | | All local strokes and TIAs  (n=886) |
|  | Stroke  (n=1697) | TIA  (n=334) | Mimic  (n=1072) | Stroke  (n=494) | TIA  (n=149) | Mimic  (n=426) |
| FAST- | <5 (<0.2%) | <5 (<1.5%) | <5 (<0.4%) | <5 (<1.0%) | <5  (<3.4%) | 0  (0.0%) | 7  (0.8%) |
| Pathway exclusion | 22  (1.3%) | 0 (0.0%) | 8  (0.7%) | 13  (2.6%) | 0  (0.0%) | 10  (2.3%) | 18  (2.0%) |
| Total | 204 (12.0%) | 7 (2.1%) | 63  (5.9%) | 71  (14.4%) | <5  (<3.4%) | 30  (7.0%) | 91  (10.3%) |