**Stroke algorithm for case ascertainment**

**Patient admitted with stroke symptoms discharged home**  
(Focal weakness, numbness, face droop, slurred speech, language deficit, vision disturbance, dizziness, ataxia, headache)

- **Symptoms persist (> 1 hr)**
  - Questionable exam, suspect stroke mimic*
    - STOP: Do Not ENROLL
  - MRI confirms infarct or ischemia
  - MRI negative but received tPA or high suspicion of cerebrovascular cause of symptoms
  - **Discharge Diagnosis: Ischemic Stroke**
    - ENROLL IN COMPASS

- **Symptoms transient (< 1 hr)**
  - CT and/or MRI show intraparenchymal hemorrhage (IPH)
  - MRI negative but likely vascular
  - MRI positive for infarct or ischemia
  - **Discharge Diagnosis: TIA†**
    - ENROLL IN COMPASS

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*Discharge diagnosis is TIA vs complicated migraine, syncope, infection, reactivation of old stroke symptoms, medication reaction, delirium  
†TIA definition: Transient episode of neurological dysfunction caused by focal brain, spinal cord, or retinal ischemia, without acute infarction.
Inclusion and Exclusion for TIA in COMPASS

**TIA**
Transient episode of neurological dysfunction caused by focal brain, spinal cord, or retinal ischemia, without acute infarction. [Easton, et al Stroke 2009;40:2276-2293.]

Discharge Diagnosis:
TIA vs another diagnosis
- Complicated migraine
- Infection
- Syncope
- Reactivation of old stroke symptoms
- Delirium
- Medication reaction, side effect, or intoxication
- Angina

Discharge Diagnosis:
TIA

MRI negative for ischemic stroke or infarct

Symptoms lasting longer than 5 minutes
*The majority of TIAs last between 5 to 60 minutes, but symptoms could be longer, so there is no upper limit for symptom duration.

STOP: DO NOT ENROLL IN COMPASS

ENROLL IN COMPASS