

Stroke and TIA: FAST Recognition and Urgent Referral

NICE NG128 (2019) | RCP National Clinical Guideline for Stroke (2023)

■ 999 NOW: Suspected Stroke

- Face drooping on one side, asymmetrical smile, or inability to smile: call 999 immediately.
- Arm weakness: one arm drifts down or cannot be raised when both arms raised together.
- Speech difficulty: slurred, garbled, wrong words, or sudden inability to speak at all.
- Sudden thunderclap headache with no warning ("worst headache of my life"): possible haemorrhagic stroke.
- Sudden loss of vision in one or both eyes, double vision, or loss of visual field.
- Sudden loss of balance or coordination with any other BE-FAST sign: call 999.
- Note the time the patient was last known to be completely well and relay it to the ambulance crew: this determines eligibility for thrombolysis and thrombectomy.
- Relay any anticoagulant use (apixaban, rivaroxaban, warfarin, dabigatran, edoxaban) to the ambulance crew.

■ EMERGENCY REFERRAL: Possible TIA

- Symptoms now fully resolved but BE-FAST-positive features occurred: urgent same-day specialist assessment according to local stroke pathways.
- Risk of stroke within 48 hours of TIA is up to 10%: same-day specialist assessment is time-critical.
- Do not advise the patient to wait for a GP appointment or to "see how they go".
- Do not give aspirin in the pharmacy. Call 999 immediately and follow local stroke pathways.

Feature	Reassuring Finding	Stroke Red Flag
Balance	Steady gait, coordinated	Sudden ataxia, vertigo with other BE-FAST signs
Eyes/Vision	Normal both eyes, no disturbance	Sudden vision loss, double vision, or field loss
Face	Symmetrical smile, no drooping	One-sided facial droop or asymmetry on smiling
Arms	Both raised equally, no drift	One arm drifts down or cannot be raised
Speech	Clear articulation, coherent	Slurred, garbled, wrong words, or no speech
Headache	Gradual, tension-type or migraine	Sudden thunderclap: worst ever, no warning

✓ PHARMACY ROLE: Secondary Prevention

- There is no safe self-care pathway for active or recently resolved stroke or TIA symptoms.
- Confirm anticoagulant adherence in patients with known atrial fibrillation at every consultation.
- Offer blood pressure monitoring: hypertension is the single largest modifiable stroke risk factor.
- Provide smoking cessation support: smokers have roughly twice the stroke risk of non-smokers.

Key reminders: Time is brain: approximately 1.9 million neurones are lost every minute without treatment; act immediately. A TIA with fully resolved symptoms is still a medical emergency: the 48-hour stroke risk can reach 10%. Do not give aspirin in the pharmacy. Call 999 and follow local stroke pathways.