ESCALAS PRÉ-HOSPITALARES PARA RECONHECIMENTO DO AVC

A Escala de Cincinnati (Cincinnati Prehospital Stroke Scale- CPSS) é uma ferramenta para o diagnóstico de **casos agudos de AVC** idealizada para o contexto pré-hospitalar, e pode ser rapidamente realizada utilizando apenas 3 parâmetros:

Paresia facial (pedir ao paciente para mostrar os dentes ou sorrir)

- Normal – ambos os lados da face movem-se simetricamente
- Anormal – um lado da face não se move tão bem quanto o outro

Déficit motor dos membros superiores (paciente deve fechar os olhos e manter os braços estendidos)

- Normal – ambos os braços movem-se simetricamente ou ambos não se movem (outros achados como pronação distal podem ser úteis)
- Anormal – um membro superior não se move ou apresenta queda

Fala (pedir que o paciente fale "não se pode ensinar novos truques a um cachorro velho"

- Normal – paciente usa corretamente as palavras sem alteração
- Anormal – paciente apresenta dificuldade para falar, usa as palavras de forma inadequada ou é incapaz de falar.

Além da CPSS, o uso de outras escalas, como a Los Angeles Prehospital Stroke Screen (LAPSS), Face/Arm/Speech Test (FAST), Recognition of Stroke in Emergency Room (ROSIER), também conferem maior acurácia ao exame pré-hospitalar do paciente com suspeita de AVE/AIT. A acurácia de cada uma delas é descrita na tabela a seguir:

Escala	Sensibilidade	Especificidade
CPSS (Cincinatti)	85 a 95%	33 a79%
FAST	81 a 95%	33 a 83%
ROSIER	83 a 93%	39 a 83%
LAPSS	59 a 75%	83 a 85%

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