ROSIER Scale

Assessr	ment	Date				Time			
Sympto	om onset	Date				Time			
GCS	E =	M =	V =	ВР			*BM		
*if Blood Glucose <3.5 mmol/L treat urgently and reassess once blood glucose normal									
Has there been loss of consciousness or syncope?						Y (-1)		N (0)	
Has there been seizure activity?						Y (-1)		N (0)	
Is there a <u>NEW ACUTE</u> onset (or on awakening from sleep)									
i. Asymmetric facial weakness						Y (+1)		N (0)	
ii.	Asymmetric arm weakness					Y (+1)		N (0)	
iii.	Asymmetric leg weakness					Y (+1)		N (0)	
iv.	Speech disturbance					Y (+1)		N (0)	
٧.	Visual field def	fect				Y (+1)		N (0)	
	*Total Sco					e		(-2 to	+5)
								_	
Provisional diagnosis									
	Stroke		Non-Str	oke (speci	fy)				

^{*}Stroke is unlikely but not completely excluded if total scores are equal to or less than 0