

# NIHSS Score Sheet

**Patient Name:**

**Date:**

**Healthcare Provider:**

**Level of Consciousness (0-2):**

- Answers questions appropriately (0)
- Confused conversation, but able to answer (1)
- Incoherent speech or no response (2)

**Best Gaze (0-2):**

- Normal (0)
- Partial gaze palsy (1)
- Forced deviation or complete gaze palsy (2)

**Visual Fields (0-3):**

- No visual loss (0)
- Partial hemianopia (1)
- Complete hemianopia (2)
- Bilateral hemianopia (3)

**Facial Palsy (0-3):**

- Normal (0)
- Minor paralysis (1)
- Partial paralysis (2)
- Complete paralysis (3)

**Motor Arm (0-4):**

- No drift (0)
- Drifts, but not full limb (1)
- Some effort against gravity (2)
- No effort against gravity (3)
- No movement (4)

**Motor Leg (0-4):**

- No drift (0)
- Drifts, but not full limb (1)

- Some effort against gravity (2)
- No effort against gravity (3)
- No movement (4)

**Limb Ataxia (0-2):**

- Absent (0)
- Present in one limb (1)
- Present in two limbs (2)

**Sensory (0-2):**

- Normal (0)
- Mild to moderate sensory loss (1)
- Severe to total sensory loss (2)

**Best Language (0-3):**

- No aphasia (0)
- Mild to moderate aphasia (1)
- Severe aphasia (2)
- Mute (3)

**Dysarthria (0-2):**

- Normal (0)
- Mild to moderate dysarthria (1)
- Severe dysarthria (2)

**Extinction and Inattention (0-2):**

- No abnormality (0)
- Visual, tactile, or auditory extinction or neglect in one sensory modality (1)
- Profound hemispatial neglect in more than one modality (2)

**Total NIHSS Score:**

**Interpretation:**

- 0-4: Minor stroke symptoms
- 5-15: Moderate stroke
- 16-20: Moderate to severe stroke
- 21-42: Severe stroke

**Treatment Recommendations and Notes:**

**Healthcare Specialist Signature:**

**Date:**