Clinical Presentation

- GCS = 15
  - Neurologically stable
  - With/without headache

- GCS = 14*-15
  - Mild focal neurological deficit with no/slow progression
  - With/without headache
  - *With the exception of mild confusion due to existing dementia or a focal deficit related to the lesion (e.g., dysphasia)

- GCS ≤ 13
  - Progressive neurological deterioration

Imaging: Abnormal CT/MRI Findings

CT/MRI images should be interpreted by the local radiologist prior to seeking neurosurgical consultation via CritiCall Ontario, unless the hospital does not have CT/MRI services.

- AND evidence of one or more of:
  - Any hemorrhage ≤ 2.0 cm
  - Vascular malformation with resolved intracranial hemorrhage
  - NB: Patients with hypertensive hemorrhagic stroke (≤ 3.0cm) are medically managed by neurology and do not require urgent consultation.

- AND evidence of one or more of:
  - Intratentorial intracranial hemorrhage without obstructive hydrocephalus
  - Intraventricular hemorrhage
  - Supratentorial hemorrhage: 2-5 cm
  - Non-traumatic subarachnoid hemorrhage

- AND evidence of one or more of:
  - Obstructive hydrocephalus
  - Intratentorial intracranial hemorrhage ≥ 3 cm
  - Lobar hemorrhage ≥ 5 cm
  - Non-traumatic subarachnoid hemorrhage
  - Infratentorial intracranial hemorrhage ≥ 3 cm
  - Lobar hemorrhage ≥ 5 cm
  - Non-traumatic subarachnoid hemorrhage

If no CT/MR scan services available but significant neurological deficit (e.g., lateralizing signs, GCS <12, presence of xanthochromia in lumbar puncture), seek consultation through CritiCall Ontario prior to arranging for transfer for CT/MR imaging.

AND evidence of one or more of:
- Any hemorrhage ≤ 2.0 cm
- Vascular malformation with resolved intracranial hemorrhage
  - NB: Patients with hypertensive hemorrhagic stroke (≤ 3.0cm) are medically managed by neurology and do not require urgent consultation.

Referral Directive

- Next Morning Referral
  - CONSULT WITH NEUROSURGEON NEXT MORNING (7 AM)**

- Emergent/Urgent
  - CALL CRITICALL ONTARIO
    - 1-800-668-4357

- Life or Limb

** Local arrangements can be made to determine the preferred time to consult with a neurosurgeon for Next Morning Referrals.

Legend:
- Next Morning Referral
- Emergent/Urgent
- Life or Limb

The criteria are intended as guidelines. Providers are to rely on their clinical judgement for each individual patient encounter.