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When Every Minute Matters: A Stroke Emergency Action Plan for Greater Boston Families

Recognizing a stroke warning sign is important. Knowing what to do next is just as critical.

For Greater Boston families, an emergency can become confusing quickly. One person may want to call the doctor, another may offer to drive, and the person experiencing symptoms may insist they only need to rest.

A shared action plan can help families avoid these delays. If someone develops possible stroke symptoms, call 911 immediately, report what you are seeing, and follow the dispatcher's instructions. Do not drive the person to the hospital yourself. Emergency medical personnel can begin care during transport.

What Readers Will Learn

- How B.E. F.A.S.T. can prompt immediate action.
- Why mild or improving symptoms should not delay a call to 911.
- What information to share with the dispatcher.

- How to create a simple household emergency plan.
- Why emergency response and post-discharge support are separate needs.

Agree on One Rule: Call First

Families do not need to confirm a stroke before requesting help. Sudden changes in balance, vision, facial movement, arm strength, or speech can be enough to suspect an emergency.

Use B.E. F.A.S.T. as a quick reminder:

- B — Balance: Sudden dizziness, loss of balance, or trouble walking.
- E — Eyes: Sudden vision changes.
- F — Face: An uneven smile or facial drooping.
- A — Arms: Sudden arm weakness or an arm that drifts downward.
- S — Speech: Slurred speech or difficulty speaking.
- T — Time: Call 911 immediately.

The purpose of this reminder is to prompt action—not to create a checklist that must be completed before calling.

Do Not Let Uncertainty Become a Delay

A possible stroke does not always look dramatic. A loved one may still be awake, able to answer some questions, or certain that nothing serious is happening.

Families should not wait because:

- Only one warning sign is present.
- Symptoms seem mild.
- The person wants to sleep or rest.
- Symptoms are beginning to improve.
- No one knows exactly when the changes started.

Stroke symptoms that come and go or disappear completely still require emergency evaluation.

A brief episode may be a transient ischemic attack, or TIA. Although symptoms can resolve, a TIA can warn of a more serious stroke and should not be ignored.

Give the Dispatcher Clear Information

When calling 911, start with your location and a direct statement: “I think this person may be having a stroke.”

Then describe the changes you observed. Specific details are more useful than a general statement that someone “doesn’t seem right.”

For example:

- “Her speech suddenly became slurred.”
- “He cannot hold his right arm up.”
- “She suddenly lost her balance and is having trouble seeing.”

Share when symptoms began if you know. If the person woke up with symptoms or the onset is unclear, report the last time they were known to be acting normally. Do not delay calling while trying to establish an exact timeline.

Let Emergency Services Handle Transportation

In Greater Boston, a family may know several nearby hospitals and feel tempted to choose one and leave immediately. But driving a person with possible stroke symptoms is not the recommended response.

Call an ambulance instead. Emergency medical personnel can begin potentially lifesaving care on the way to the hospital. The CDC specifically advises against driving yourself or having another person drive you when stroke symptoms occur.

The family’s role is to request help quickly and communicate clearly—not to compare hospital routes during an emergency.

Follow Instructions While Help Is on the Way

Stay with your loved one and follow the dispatcher's directions. Do not offer aspirin as a home treatment for a suspected stroke unless emergency personnel specifically instruct you to do so.

Some strokes are caused by bleeding rather than a blood clot. Aspirin can worsen a bleeding stroke, so medication decisions should be left to the emergency team.

Avoid treating a brief improvement as permission to cancel help. Emergency evaluation is still needed even if the person's speech, strength, balance, or vision appears to return to normal.

Create a Simple Household Emergency Plan

A useful plan does not need to be complicated. Families can write a short reminder and keep it somewhere visible:

1. Recognize a sudden change.
2. Call 911 immediately.
3. Say that a stroke is suspected.
4. Share the symptoms and timing, if known.
5. Follow the dispatcher's instructions.
6. Do not drive or give aspirin as a home treatment.

Review the plan with relatives, friends, and regular caregivers so everyone understands that suspected stroke symptoms require emergency services—not a routine appointment or a call to the home care office. These steps reflect established stroke emergency guidance.

Separate the Emergency Plan From the Recovery Plan

A stroke emergency and recovery at home require different kinds of support.

During the emergency, the priority is immediate medical evaluation. After treatment and discharge planning, families may need help coordinating medications, monitoring health changes, arranging rehabilitation, and managing daily routines.

Always Best Care of Greater Boston offers private nursing services that include medication management and administration, monitoring changes in condition, and coordination with participating healthcare providers. Services can be tailored to short-term recovery or longer-term needs.

Families can contact the team after the immediate emergency has been addressed to discuss appropriate support at home. If new stroke symptoms occur during recovery, call 911 rather than waiting for a scheduled nursing visit.

Frequently Asked Questions

Should we call the doctor before calling 911?

Not for suspected stroke symptoms. Call 911 immediately so emergency evaluation and care can begin without delay.

What if our loved one insists they feel better?

Symptoms that improve or disappear can still represent a serious emergency. Call 911 even if the person says they have recovered.

What if symptoms began while the person was asleep?

Call immediately and tell responders when the person was last known to be acting normally. An uncertain start time is not a reason to wait.

Can we drive if the hospital is very close?

The recommended response is to call 911, not drive. An ambulance allows emergency medical personnel to begin care during transport.

When should we contact Always Best Care of Greater Boston?

After emergency treatment and discharge planning, contact the team to discuss private nursing and available support at home. Its services include clinical monitoring, medication management, and care coordination.

Make the Plan Before You Need It

Talk with your family about how you will respond to a possible stroke. A clear plan can prevent uncertainty from turning into a delay: recognize a sudden change, call 911, and let emergency professionals guide the response.

For support after treatment and discharge, contact Always Best Care of Greater Boston to discuss personalized care at home. For suspected stroke symptoms, call 911 first.

Contact Always Best Care of Greater Boston at (617) 489-9000 to learn more and schedule your free consultation.