



Student name: _____

Date of test: _____

BEFAST Stroke Scale Checklist				
	Normal	Abnormal	Check if scored correctly	Instructor comments
Balance: Have the patient perform finger-to-nose and ask questions.				
<i>Normal</i> —able to smoothly move finger from nose to examiner’s finger <i>Abnormal</i> —ataxia or dysmetria on movement Ask patient about trouble walking, dizziness, or loss of coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Eyes: Ask questions and check for gaze deviation.				
<i>Normal</i> —no new vision abnormalities <i>Abnormal</i> —loss of vision in one or both eyes, blurry or double vision, gaze deviation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Facial droop: Have the patient show teeth or smile.				
<i>Normal</i> —both sides of the face move equally/ symmetrically <i>Abnormal</i> —one side of the face does not move as well as the other side	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Arm drift: Have the patient close eyes and extend both arms straight out, with palms up, for 10 seconds.				
<i>Normal</i> —both arms move the same or both arms do not move at all (other findings, such as pronator drift, may be helpful) <i>Abnormal</i> —one arm does not move or one arm drifts down compared with the other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Speech: Have the patient say, “You can’t teach an old dog new tricks.”				
<i>Normal</i> —patient uses correct words with no slurring <i>Abnormal</i> —patient slurs words, uses the wrong words, or is unable to speak	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Time: Ask the patient or witnesses when symptoms began or time of last known well.				
Record time of last known well.	Time: _____			
The BEFAST is a stroke screening exam. If any abnormality is found during the assessment, it means that there is a possibility of a stroke. A code stroke or stroke alert should be activated.				
Test results: Check PASS for passing or NR for needs remediation:			<input type="checkbox"/> PASS	<input type="checkbox"/> NR
Instructor initials: _____		Instructor number: _____		Date: _____

Abbreviation: BEFAST, balance, eyes, face, arm, speech, time.

Adapted from Aroor S, Singh R, Goldstein LB. BE-FAST (Balance, Eyes, Face, Arm, Speech, Time): Reducing the Proportion of Strokes Missed Using the FAST Mnemonic. *Stroke*. 2017 Feb;48(2):479-481. doi: 10.1161/STROKEAHA.116.015169