1. Stroke is a debilitating disease that is the fourth most common cause of death in Singapore.
2. All patients diagnosed with a transient ischaemic attack (TIA) based on the reversal of focal neurological deficits within 24 hours have no evidence of cerebral infarction on neuroimaging.
3. Ischaemic strokes account for 40%–50% of strokes that occur in Singapore.
4. TIs are early warnings that signal a need to aggressively decrease the modifiable risk factors for stroke.
5. The incidence of stroke among adults aged 25–64 years is highest among those of Chinese ethnicity compared to individuals of Malay or Indian ethnicity.
6. The median age of stroke in Singapore was 67 years in 2014.
7. Hypertension, diabetes mellitus and hyperlipidaemia are modifiable risk factors for TIA and stroke.
8. Psychosocial stress is a risk factor for stroke.
9. Smoking is not a risk factor for stroke.
10. A patient who has a suspected TIA should wait for symptoms to resolve before seeking medical attention.
11. In general, individuals who are right-handed have a dominant left hemisphere.
12. In patients suspected to have an acute stroke, capillary glucose testing should be performed.
13. Patients who are initially thought to have suffered an acute stroke, but are later found to have a stroke mimic should be referred to the hospital for appropriate further investigation.
14. FAST (face, arm, speech, time) is an easy-to-remember public education tool that has been validated for both anterior and posterior circulation strokes.
15. In general, the majority of Singaporeans are able to cite at least one of the warning signs in the FAST mnemonic.
16. The ABCD² score may be used to assess stroke risk following a TIA.
17. The time window for recombinant tissue plasminogen activator therapy in a patient with suspected ischaemic stroke is 4.5 hours from the onset of the stroke.
18. Patients who have just suffered a stroke and have acutely elevated blood pressure readings (≥ 200/120 mmHg) should have their blood pressure aggressively reduced at the primary care clinic while awaiting for emergency medical services to transport the patient to hospital.
19. In Singapore, a patient with TIA or stroke should ideally have neuroimaging performed within 24 hours of the onset of symptoms.
20. The following are acceptable as first-line antiplatelet agents in patients with stroke: aspirin, dipyridamole/aspirin, or clopidogrel.