

Figure 1. Neuroimaging Evaluation.

An axial section of a **diffusion-weighted image** of the brain shows multiple **bright spots** in the cortical territory of the right middle cerebral artery. Panel A shows two small brain infarctions (arrows), Panel B shows one small infarct (arrow), and Panel C shows one small infarct (arrow).

Table 1. Common Symptoms Suggestive of TIA.*

Definite TIA

Focal cerebral or retinal symptoms lasting for seconds or minutes and typically lasting <1 hr

Motor weakness in two limbs or in one limb and the face

Sensory deficit in two limbs or in one limb and the face

Visual-field defect (homonymous hemianopia) or monocular blindness

Aphasia or dysarthria

Possible TIA†

Unsteady gait

Diplopia

Vertigo, dizziness

Dysphagia

Usually not a TIA‡

Amnesia

Confusion

Incoordination of limbs

Partial sensory deficit (abnormal sensation or deficit in one limb or only in the face)

Unusual cortical visual symptoms (lone bilateral blindness and bilateral positive visual phenomena)§

Transient loss of consciousness

Headache

Phosphenes, photopsias, complex visual hallucinations, and palinopsia

KEY CLINICAL POINTS

TRANSIENT ISCHEMIC ATTACK

- Cerebral or retinal symptoms consistent with transient ischemic attack (TIA) usually last for seconds or minutes and typically last less than 1 hour.
- A suspected TIA should be evaluated urgently in a TIA clinic or in an emergency department where appropriate specialist expertise and imaging are available.
- Diffusion-weighted imaging of the head is now the preferred test for patients with a suspected TIA and should be performed immediately.
- If possible, immediately after the onset of symptoms, the patient should take aspirin at a dose of 300 mg, followed by 75 to 100 mg daily; clopidogrel should be added to aspirin during the first 21 days after the TIA (at a 300-mg loading dose, followed by 75 mg per day).
- The long-term prevention of stroke after TIA typically includes antiplatelet or anticoagulant treatment (depending on etiologic findings), blood-pressure lowering, lipid lowering, glycemic control, smoking cessation, and counseling regarding diet and lifestyle. Carotid endarterectomy should be performed if appropriate.

Diagnosis of TIA

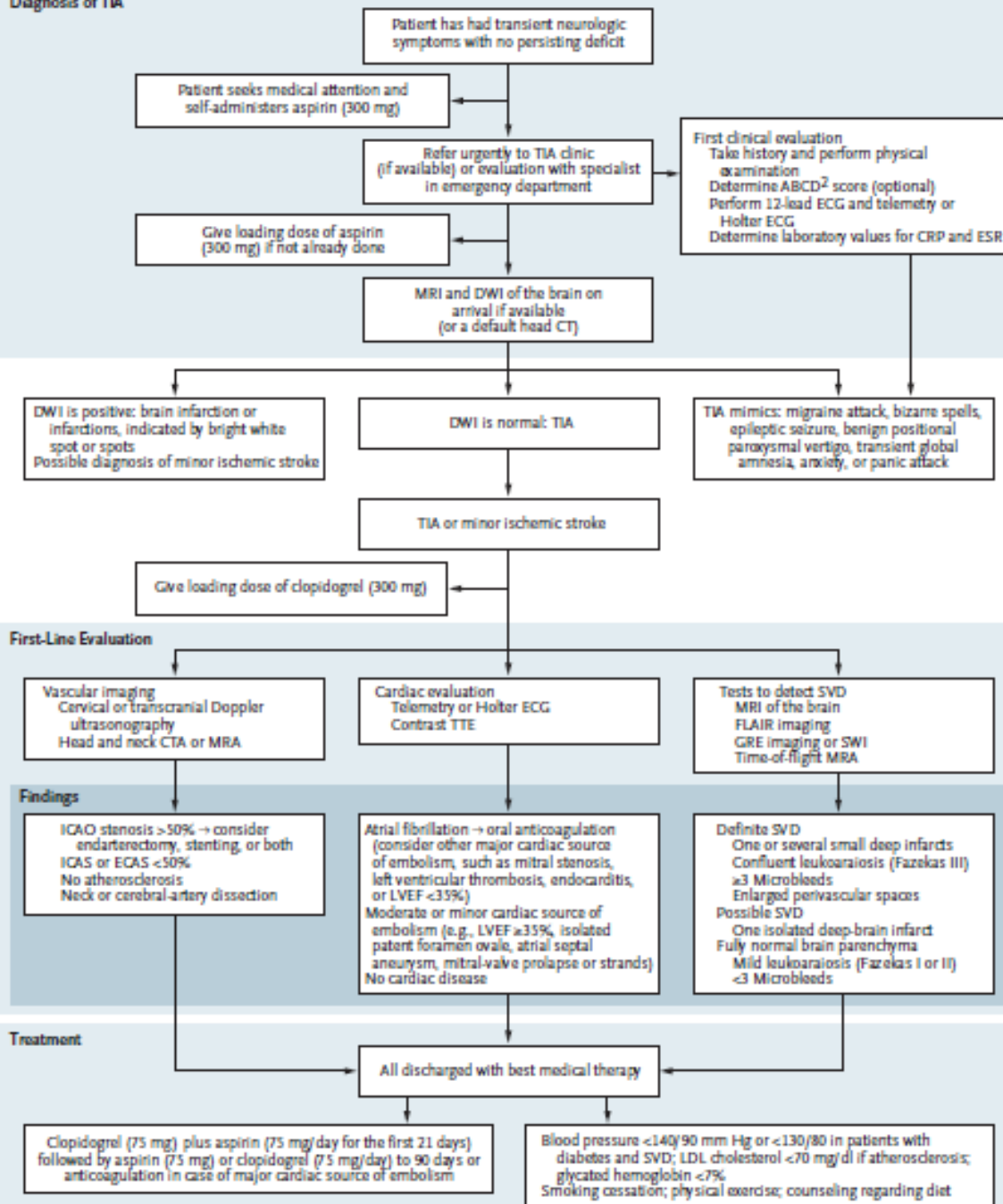


Table S2. ABCD₂ Score.¹

Predictors of Risk	Number of Points
Age >60 years	1
Blood pressure: SBP >140 mmHg or DBP >90 mmHg	1
Clinical characteristics: speech impairment without focal weakness	1
Clinical characteristics: focal weakness	1
Duration of symptoms 10 to 60 min	1
Duration of symptoms >60 min	2
Diabetes	1

ABCD₂ denotes age, blood pressure, clinical weakness, duration, diabetes; DBP diastolic blood pressure; SBP systolic blood pressure.