A 73-year-old man with hypertension presented with left hemiparesis and left hemineglect of unclear duration. CT with angiography of the head and neck showed subacute infarcts of the right frontal lobe and a right internal carotid artery thrombus, with corresponding perfusion abnormalities that would have qualified him for thrombectomy (figure). On closer examination, his facial hair asymmetry suggested a matured hemineglect to his left face. Based on the unenhanced imaging findings and facial hair asymmetry, we estimated his stroke onset to be more than 24 hours prior to evaluation, thereby disqualifying him for thrombectomy.
Although we are increasingly reliant upon perfusion imaging to inform treatment decision-making, the time of symptom onset remains critical. When symptom onset is unknown, subtle clues may be helpful.

**Author contributions**

J.E. Siegler: drafting/revising the manuscript, data acquisition, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, contribution of vital reagents/tools/patients, acquisition of data, study supervision. W.W. Aamodt: drafting/revising the manuscript, data acquisition, accepts responsibility for conduct of research and final approval. K.A. Humbert: data acquisition, analysis or interpretation of data, accepts responsibility for conduct of research and final approval.

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**Reference**

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