

Stroke Standing Orders: Checklist for TPA (Alteplase) for Acute Ischemic Stroke

INCLUSION CRITERIA	<u>YES</u>	<u>NO</u>	<u>RN or MD INITIALS</u>	<u>COMMENTS</u>
Age 18 or older				
Clinical diagnosis of ischemic stroke causing a measurable neurological deficit.				
Time of onset of symptoms well established to be less than 180 minutes before treatment would begin.				
EXCLUSION CRITERIA				
Major symptoms that are rapidly improving by the time of treatment.				
Evidence of intracranial hemorrhage on CT scan.				
Hypodensity or mass effect suggestive of evolving infarction on CT scan.				
Seizure at onset of stroke unless determined by physician to be separate event				
Clinical presentation of Subarachnoid Hemorrhage, even if initial CT is negative.				
On repeated measurement, SBP is greater than 185, or DBP is greater than 110 at the time treatment is to begin.				
Requires overly aggressive treatment to reduce BP.				
Blood glucose is less than (<) 50 or greater than (>) 400.				
Platelet count of less than (<) 100,000.				
Patient is currently taking oral anticoagulants and PT is greater than (>) 15, INR greater than (>) 1.5				
Patient has received heparin within 48 hours and has an elevated PTT.				
Serious head trauma in the previous three months.				
Major surgery or serious trauma in the previous 14 days.				
History of stroke in the previous three months.				
History of an intracranial hemorrhage.				
Patient is known or suspected to be pregnant.				
<u>CAUTIOUS USE</u>				
Patient is currently taking oral anti-platelet drugs.				
History of GI/GU hemorrhage in previous 21 days.				
Recent arterial puncture at a non-compressible site.				
Lumbar puncture in the previous 7 days.				
Clinical presentation consistent with acute myocardial infarction.				
Clinical presentation consistent with post-myocardial pericarditis.				

Source: Brackenridge Hospital, Austin, TX.