

Thrombolytic Therapy Guidelines for Ischemic Stroke

<u>Inclusion Guidelines</u>	Yes	No
Clinical Evidence of Ischemic Stroke		
Laboratory Results Meet Criteria		
Deficit Measurable on the NIHSS		
CT (Head) Show NO Hemorrhage		
Clearly Defined Time of Onset, less than 3 hours		
Patient Age Greater Than 18 Yrs Old		
Neurologist Consult Obtained		
Informed Consent Obtained		

<u>Exclusion Guidelines</u> (Check each box if appropriate)		
<input type="checkbox"/> No exclusions apply		Intracranial neoplasm / arteriovenous malformation / aneurysm
<input type="checkbox"/> History of stroke or head trauma within 3 months		Recent intracranial or intraspinal surgery
<input type="checkbox"/> Symptoms suggest subarachnoid hemorrhage		SBP greater than 185 and/or DBP greater than 110 on repeats
<input type="checkbox"/> Noncompressible arterial access in 7 days		Active internal bleeding
<input type="checkbox"/> History of prior intracranial hemorrhage		Heparin within 48 hours and elevated aPTT
<input type="checkbox"/> Acute bleeding or acute trauma		On direct thrombin inhibitor with elevated related lab
<input type="checkbox"/> Thrombocytopenia (Platelet count less than 100,000)		On factor Xa inhibitor with elevated related lab
<input type="checkbox"/> Pt currently taking anticoagulants		Evidence of multilobar infarct per CT
<input type="checkbox"/> INR greater than 1.7 and/or PT greater than 15 seconds		Acute pericarditis
<input type="checkbox"/> Blood glucose less than 50 mg/dl OR greater than 400 mg/dl		Pt currently taking anticoagulant, and INR greater than 1.7, or PT greater than 15 seconds
<input type="checkbox"/> LP in last 7 days		

<u>Relative Exclusion Guidelines</u> (Check each box if appropriate)		
Consider risk to benefit of IV rtPA administration carefully if any of these relative contraindications are present.		
<input type="checkbox"/> No exclusions apply		Seizures at onset with postictal residual neuro impairments
<input type="checkbox"/> Minor and isolated stroke symptoms ONLY		Major surgery within 14 days
<input type="checkbox"/> Rapidly improving neurologic symptoms		Serious trauma within 14 days
<input type="checkbox"/> History of GI or GU bleeding within 21 days		History of myocardial infarction within 3 months
<input type="checkbox"/> Known or suspected pregnancy		

TO Read Back SCANNED POWERCHART
 Order Taken By Signature: _____ Date/Time: _____
 Physician Signature: _____ Date/Time: _____

Source:
 Stroke National Hospital Inpatient Quality Measures: Specifications Manual for National Hospital Inpatient Quality Measures Discharges 10-01-15 (4Q15) through 06-30-16 (2Q16) [Internet]. Version 5.0a. Baltimore (MD): Centers for Medicare & Medicaid Services (US); Joint Commission (US). 2013 [modified 2013 Oct 3; cited 2015 Sep 24]. Available from: <http://www.qualitynet.org/dcs/ContentServer?c=Page&pagename=QnetPublic%2FPage%2FQnetTier4&cid=1228774725171>.

Add'l Reference: Edward, C. J. et al. (2013) Guidelines for the early management of patient with acute ischemic stroke. Stroke Journal of the American Heart Association, January 2013, 24-30. 10.1161/STR.0b013e318284056a.

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