

### **Montana Stroke Initiative Acute Ischemic Stroke Orders**

# **Emergency Department Protocol for Treatment Candidates**

### (LESS THAN 3 HOURS FROM ONSET)

Patient Name:	MR#	Date:	/	_/
	Private Vehicle ☐ EMS t or Last Seen Normal:		en Used	
• 1	gency Department:			
Uital signs now and Cardiac Monitor O2 per NC or Masi STAT Head CT no Two (2) IVs: 18 ga 20 ga STAT CBC, BMP,	now and q30 minutes with d q15 minutes: baseline to k to keep O2 sat >92% contrast uge saline lock auge – Start 0.9 NS @ 75 PT/PTT, INR blood glucose if not alread	emperature cc/hr		
Foley catheter if se No heparin, aspirin				
For t-PA Patients Only* Note: If BP not easily co	f >185/110 on two separa Give Nitropaste 1" to che Give Labetalol 10 mg IV. Give Labetalol 20 mg IV. ontrolled with above steps 20 for Non-treatment C	est/back. If no affect/1 min. Hold if HR //1 min. Hold if HR //2 exclude patient from	et in 15 mi <50. If no <50	in o effect
Labs: If Patient taking considered for thrombo	warfarin wait for INR begins if INR $\leq 1.5$ .	fore continuing. Pa	tient may	be
Continue to page 2 for	Exclusion Criteria for tPA	A (Alteplase)		<del>-</del>
Date://	Time: Physici	an Signature		

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Exclusion Criteria: If any of the following apply, STOP					
CT Brain with any hemorrhage (Note: patients with large hypodensities in					
appropriate region on CT should be questioned in greater detail regarding true					
time of onset or last seen normal)					
BP >185/110 at time of treatment					
Minor symptoms (NIHSS <4) or Rapidly improving symptoms					
Clinical history suggestive of subarachnoid hemorrhage even with normal CT					
INR >1.5 or receiving heparin with elevated PTT (Note: patients receiving					
heparin but have a normal PTT prior to treatment may still be considered eligible					
candidates)					
Platelets <100K					
History of any of the following:					
- Intracranial hemorrhage/Neoplasm/AVM					
- Major surgery in <14 days					
- Stroke or head trauma in last 3 months					
- Arterial puncture at non-compressible site < 7 days					
- GI or GU hemorrhage in last 21 days					
- Lumbar puncture in past 24hrs					
- Recent MI (< 3 wks) w/ or w/o presumed pericarditis					
Glucose <50 or >400 (Note: this may be corrected to see if symptoms resolve.					
If they do not resolve with normalization of values then patient may be					
considered eligible					
Presumed septic embolus					
If patient meets all criteria for thrombolysis for acute ischemic stroke call Neurologist if desire patient be transferred.					
Administration of IV tPA					
NOTE: Maximum dose is 90mg (see dosing table next page)					
Do not use Cardiac Dose					
Do not give ASA, Heparin					
Patient weight (Iza)					
Patient weight (kg) Total dose = 0.0 mg/kg V (weight) = mg					
Total dose = 0.9 mg/kg X (weight) = mg Give 10% of total mg over 1 minute Time given					
Give 90% of totalmg over 1 hour Time given					
Time given					
Continue to monitor vitals and neurologic exam q15 minutes.					
Suspect Intracranial hemorrhage if acute worsening, new severe headache or acute					
hypertension or sudden nausea with vomiting.					
v I					
Date:/ Time: Physician Signature					

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### Montana Stroke Initiative Modified NIH Stroke Scale

**Scoring Guide Item Name Patient Score** LOC Questions 0=Answers both correctly 1=Answers one correctly 1. Age 2. Name 2=Answers neither correctly **LOC Commands** 0=Performs both correctly 1. Open and close eyes 1=Performs one correctly 2. Open and close hand 2=Performs neither correctly Gaze 0=normal 1=partial gaze palsy 2=total gaze palsy Visual Field Cut 0=no visual loss 1=partial field cut (homonymous) 2=complete field cut 3=no vision Left Arm Motor 0=no drift 1=drift before 10 seconds 2=falls before 10 seconds 3=no effort against gravity 4=no movement **Right Arm Motor** 0=no drift 1=drift before 10 seconds 2=falls before 10 seconds 3=no effort against gravity 4=no movement **Left Leg Motor** 0=no drift 1=drift before 5 seconds 2=falls before 5 seconds 3=no effort against gravity 4=no movement Right Leg Motor 0=no drift 1=drift before 5 seconds 2=falls before 5 seconds 3=no effort against gravity 4=no movement Sensory 0=normal 1=abnormal 0=normal Language 1=mild aphasia 2=severe aphasia 3=mute or global aphasia Neglect 0=normal 1=mild

Total Score	(out of 31)	)	

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2=severe



## **Montana Stroke Initiative**

#### tPA Dosing Guidelines

	Conversion to	Total IV t-PA	t-PA bolus	t-PA bolus	Discard dose t-	Infusion	Infusion
lbs	kg	dose (mg) at	(mg)	(ml)	PA (not for	dose (mg)	rate (ml/hr)
		0.9mg/kg	10% of total		infusion)		
220+	100	90	9	9	10	81	81
210	95.5	85.9	8.6	8.6	14.1	77.3	77.3
200	90.9	81.8	8.2	8.2	18.2	73.6	73.6
190	86.4	77.7	7.8	7.8	22.3	70	70
180	81.8	73.6	7.4	7.4	26.4	66.3	66.3
170	77.3	69.5	7	7	30.5	62.6	62.6
160	72.7	65.5	6.5	6.5	34.5	58.9	58.9
150	68.2	61.4	6.1	6.1	38.6	55.2	55.2
140	63.6	57.3	5.7	5.7	42.7	51.5	51.5
130	59.1	53.2	5.3	5.3	46.8	47.9	47.9
120	54.5	49.1	4.9	4.9	50.9	44.2	44.2
110	50	45	4.5	4.5	55	40.5	40.5
110	45.5	40.9	4.1	4.1	59.1	36.8	36.8

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