

IDHI Stroke Program Acute Stroke IV alteplase Critical Care Orders

Patient Name: _____ Date Initiated: _____ Time Initiated: _____

Allergies: _____

1. Admit to Critical Care Unit
2. Continue IV alteplase infusion at ___ ml/h for a total of 60 minutes. **Efforts should be made to not interrupt the infusion. Upon completion of alteplase infusion, without flushing, start normal saline at the alteplase infusion rate for 30 minutes to ensure patient receives the remaining alteplase dose in the IV tubing.**
3. Continuous ECG monitoring
4. Vital signs and neuro checks
 - every 15 minutes for 2 hours after the start of alteplase infusion, then
 - every 30 minutes for 6 hours, then
 - every one hour for 24 hours.
5. Bleeding Precautions: Check puncture sites for bleeding or hematoma. Apply digital pressure or pressure dressing to active compressible bleeding sites. Evaluate urine, stool, emesis or other secretions/drainage for blood. Perform Hemocult testing if there is any evidence of bleeding.
6. Call attending Dr. _____, pager number _____ immediately for evidence of bleeding, neurological deterioration, or vital signs outside of the following parameters:
 - Systolic blood pressure greater than 180 or less than 110
 - Diastolic blood pressure greater than 105
 - Pulse less than 50
 - Respirations greater than 24 or less than 12
 - Decline in neurological status or worsening stroke symptoms.
7. Intake and output every 8 hours
8. Activity: Bed rest for 24 hours (or as ordered by MD)
9. Pneumatic compression hose while in bed
10. IV fluids: 0.9 % Normal Saline at 1ml//kg/hour (or as ordered by MD)
11. Oxygen at 2 liters/minute per nasal cannula if needed to keep O2 Sat greater than 94%
12. Sources of hyperthermia (temperature >38°C) should be identified and treated with antipyretic medications. Hyperglycemia should also be treated to achieve blood glucose levels in a range of 140 to 180 mg/d. Closely monitor to prevent hypoglycemia in patients with acute ischemic stroke.
13. National Institutes of Health Stroke Scale (NIHSS) performed on admission to ICU & 24 hours post-alteplase
14. Dysphagia Screen and Nursing Bedside Swallow Evaluation on **admission** and **repeat in 24 hours**. Consult Speech Pathology as indicated by results

DYSPHAGIA SCREEN

Initial

24 hours

- Is patient being suctioned of secretions?
- Is patient nauseated or vomiting?
- Is patient NPO for tests?

- Yes No
- Yes No
- Yes No

- Yes No
- Yes No
- Yes No

If any Yes answers, make patient NPO and notify Medical Doctor. If all NO answers, perform Nursing Bedside Swallow Evaluation as below.

NURSING BEDSIDE SWALLOW EVALUATION:

Monitor pulse-ox during and for five minutes following the evaluation. Have patient hold cup and take sip of water, no ice, and no straw. Have patient talk.

Initial

24 hours

- Pulse oximeter drop below 92%?
- Is there coughing/choking when drinking?
- Any swallowing difficulties noticed?
- Wet or gurgled voice when talking?
- Is there drooling or facial paralysis?
- Is there a tracheostomy?

- Yes (4 points) No
- Yes (4 points) No
- Yes (4 points) No
- Yes (4 points) No
- Yes (1 points) No
- Yes (3 points) No

- Yes (4 points) No
- Yes (4 points) No
- Yes (4 points) No
- Yes (4 points) No
- Yes (1 points) No
- Yes (3 points) No

Score: _____

Score: _____

If score greater or equal to 4, make patient NPO and consult Speech Pathology.

1. NPO including for medications for 24 hours then advance diet as per bedside swallow as below.
2. Diet:
 - NPO (Score 4 or more) Dysphagia pureed (Score 3) Heart Healthy (Score less than 3) ADA _____ calories
 - Mechanical Soft Thickened liquids Other _____
3. **NO** heparin, warfarin, aspirin, Lovenox, Fragmin, Pradaxa or Xarelto for 24 hours from start of alteplase infusion. Obtain CT of brain to rule out hemorrhage.
4. Start ASA or antiplatelet agent of choice after 24 hours of start of alteplase infusion.
5. Pharmacologic DVT prophylaxis of choice after 24 hours from start of alteplase infusion.
6. Laboratory: CBC BMP LFT PT with INR PTT B12 Folate TSH
 CPK every 8 hours X 3 HbA1C Troponin I Fasting Lipid panel in am Others _____
7. Diagnostic Workup:
 - ECG CT Head to be done on _____ at _____ Echocardiogram 2-D
 - TEE Others: _____
8. Medications:

Acetaminophen 650 mg by mouth every 4 hours as needed for pain or fever.

9. Consults :
 - Physical and Occupational Therapy Speech Therapy for swallow evaluation
 - Speech Therapy for Language rehab In-patient Rehab Social Services
 - Tobacco cessation counselor if patient has used tobacco in last 12 months

Physician consult: _____

10. Provide patient and family with stroke education prior to discharge.

*Upon patients discharge, change in disposition, death, or transfer to another facility **NOTIFY the IDHI Stroke Program Call Center**

Signature: _____

Date/Time: _____