Thrombolysis Pathway

STROKE - ? Thrombolysis
FAST + or Rosier +
Onset ≤ 4.5 hours

- Determine definite time of onset (< 4 hrs)
- Inclusion / Exclusion criteria
- NIHSS < 25; Rankin > 3
- Urgent CT Brain
- Bloods: FBC, U+E, Glc, Coag, Gp + Hold,
- Capillary glucose
- 18G cannulas both arms
- Request monitored bed
- Weigh
- Inform Stroke Consultant on call
- Risk/benefits explained to patient/relative

NOT FOR THROMBOLYSIS

CT Brain: Haemorrhage or marked ischaemic changes or Inclusion / Exclusion not met or Treatment refused

POSSIBLE THROMBOLYSIS

CT: advanced Ischaemic Change: Start Aspirin 150-300 mg PO/PR

CT Brain: Haemorrhage: Reversal if on anticoagulation + D/W Beaumont Hospital or Cork University Hospital

Thrombolyse rtPA 0.9mg/KG: 10% push dose 90% over 60mins

- CT Brain consistent with early stroke
- Criteria met
- Consent obtained

Monitored bed
Neuro Obs:
15mins x 1°, 30 mins x 6°, hourly x 17°
Capillary glucose if abnormal or diabetes
Post thrombolysis guidelines
Maintain BP < 180/105

UNSTABLE

Rescan urgently If Bleed: refer Guidelines

STABLE

Bleed (>PICH 2) refer guidelines
No Bleed Start Aspirin

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