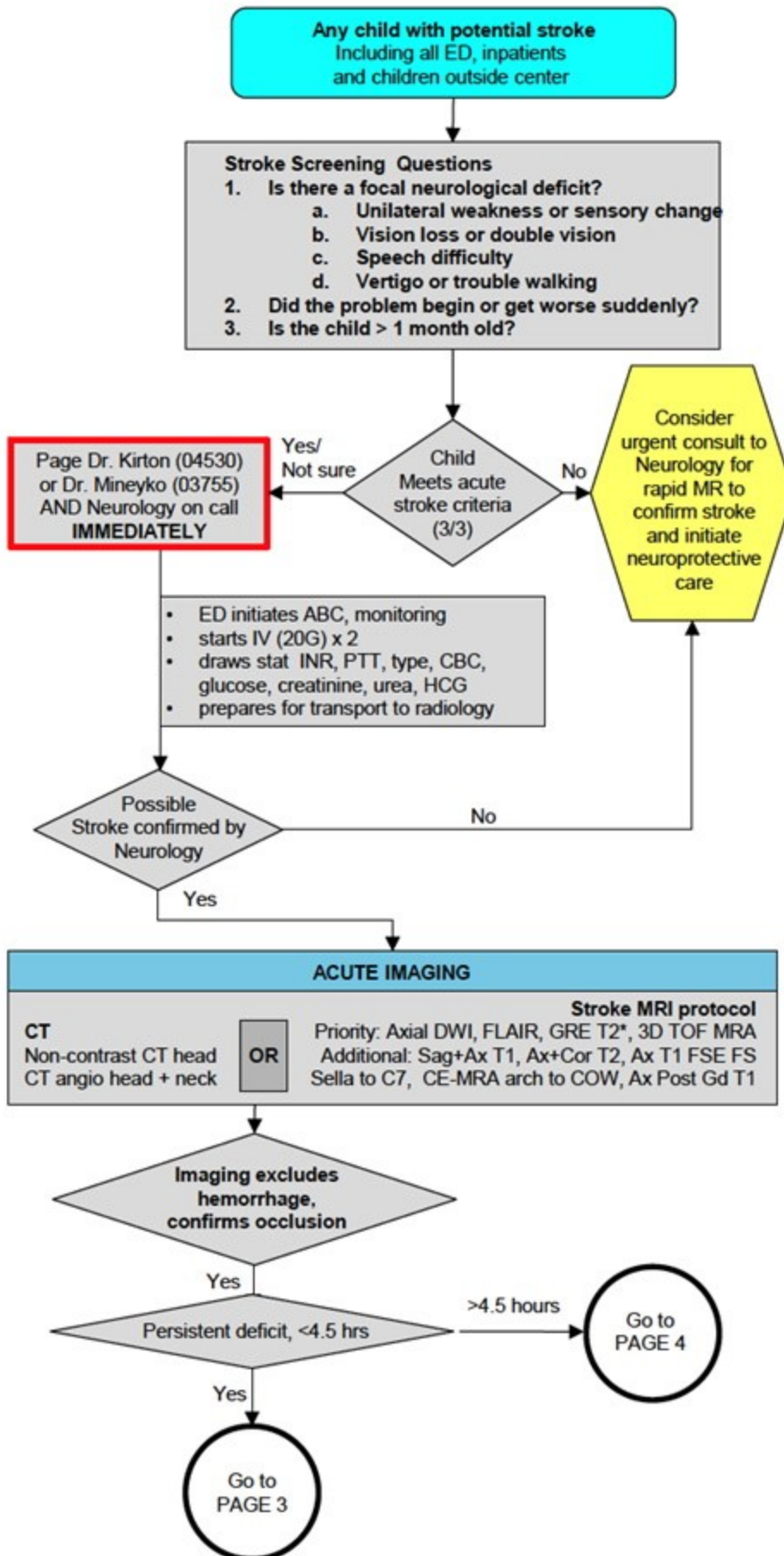


# ACH Acute Stroke Guideline: SCREENING

Last Updated: Feb 2017  
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- Neuroprotective care**
- NPO
  - Head of bed flat
  - Normotension:
    - target SBP 50<sup>th</sup> – 95 +15<sup>th</sup> %ile for age
    - treat lows with NS +/- pressors,
    - treat HTN with labetalol or ACEI
  - Normovolemia: NS maint, bolus PRN
  - Normal O<sub>2</sub>, CO<sub>2</sub> and pH
  - Normothermia: treat >37° with acetaminophen +/- external cooling
  - Normoglycemia: no glucose to IV, target: 4-10
  - Seizure control: AED ASAP with any suspected seizure activity (fos-PHT)

- tPA contraindications**
- Allergy to tPA
  - >4.5 hrs from last seen well
  - Rapidly improving or PedNIHSS <6
  - Stroke 2° to SBE, SCD, meningitis, marrow/fat embolism, or moyamoya
  - ASPECTS ≤7
  - Known ICH, AVM, aneurysm
  - Persistent HTN (>95+15%ile)
  - Platelets <100 X10<sup>9</sup>/L
  - Glucose <2.8 or >22 mM
  - PTT >40 sec or INR >1.4
  - LMWH within 24 hrs
  - Pregnancy
  - Imaging evidence of blood
  - Intracranial dissection
  - PedNIHSS >25 ⊕
  - Arterial puncture at non-compress site or lumbar puncture <7d
  - Stroke or major head trauma <3mo
  - Neurosurgery <90 days ⊕
  - Major surgery or biopsy <10d ⊕
  - Malignancy or recent cancer Tx ⊕
  - GI or GU bleeding <21days ⊕
- ⊕ = relative contraindication