

Intravenous t-PA Administration Inclusion/Exclusion Criteria for Ischemic Stroke

This inclusion/exclusion criteria provides a tool to be used in the assessment of a patient in the acute setting. Final decision to use t-PA is at the discretion of the treating physician and neurologist.

Patient Inclusion Criteria

- Yes___ 1. Age 18 years or older.
- Yes___ 2. Clinical Diagnosis of Ischemic Stroke.
- Yes___ 3. Measurable neurological deficit.
- Yes___ 4. Clearly defined time of stroke onset (within 180 minutes of stroke onset).
- Yes___ 5. Baseline CT scan showing no evidence of intracranial hemorrhages or mass.
- Yes___ 6. Neurology consultation.

Patient Exclusion Criteria

- No___ 1. Rapidly improving or minor symptoms.
- No___ 2 CT scan showing evidence of intracranial hemorrhage.
- No___ 3 History of seizure at stroke onset.
- No___ 4 Prior history of intracranial hemorrhage that could increase the risk of intracranial hemorrhage.
- No___ 5 Stroke or serious head injury in the preceding 3 months.
- No___ 6 Major surgery or other serious trauma during the preceding 2 weeks.
- No___ 7 Gastrointestinal or urinary tract hemorrhage during preceding 3 weeks.
- No___ 8. SBP > 185mm Hg or DBP > 110 mm of Hg at the time of t-PA infusion.
- No___ 9 Aggressive treatment to lower BP.
- No___10 Glucose < 50mg/dL or > 400 mg dL.
- No___11 Symptoms of subarachnoid hemorrhage.
- No___12 Arterial puncture at noncompressible site or LP during the preceding 1 week.
- No___13 Platelet count < 100,000/mm³. (t-PA can be started prior to receiving the CBC results but should be discontinued if platelet count is < 100,000/mm³).
- No___14 Heparin during the preceding 48 hours associated with an elevated aPTT.
- No___15 Clinical presentation suggesting pericarditis or myocardial infarction.
- No___16 Pregnant female.
- No___17 Currently taking oral anticoagulants with INR >1.5.

Relative Contraindications

1. Early signs of large cerebral infarction: edema, hypodensity, mass effect, and obliteration of sulci in more than 1/3 of middle cerebral artery territory on CT scan.
2. NIHSS >22.
3. Difficult to control hypertension.
4. History of AVM or aneurysm.

Decision to treat with IV t-PA _____ Yes _____ No Reason: _____

Neurologist: _____ Date/Time: _____