

**Emergency Department – Routine Transfer Orders Acute Stroke With Alteplase**

**Prescriber instructions:** 1) The prescriber MUST check an empty box (☐) to activate the corresponding order.  
 2) An order with a black box ■ will be activated UNLESS the prescriber crosses out the complete order with a line and initials.

Date: year/month/day	Time:	Allergies: ☐ None ☐ Yes Review electronic record	*Order #	Initials
<b>Procedure During and After Alteplase Infusion</b>				
<ul style="list-style-type: none"> <li>■ Call Hamilton General Hospital (HGH) ED to give a pre-alert when leaving (905) 527-4322 ext. 46251</li> <li>■ Insert foley catheter to straight drainage prior to transfer</li> <li>■ NPO</li> <li>■ Vital Signs q 15 minutes x 1 hour, then q 30 minutes</li> <li>■ Canadian Neurological Scale (CNS) at time of bolus, q 15 minutes during infusion, and then q 30 minutes               <ul style="list-style-type: none"> <li>• If CNS decreases by 1 point with signs of neurological decline, STOP infusion and notify most responsible physician (MRP) at Grand River Hospital (GRH)</li> </ul> </li> <li>■ Continuous Cardiac Monitoring.</li> <li>■ Continuous Pulse Oximetry. Apply oxygen by nasal cannula or mask to maintain SpO2 greater than 92%</li> <li>■ For any acute neurological worsening or if patient develops severe headache, acute hypertension, nausea or vomiting:               <ul style="list-style-type: none"> <li>• Patch MRP at GRH</li> <li>• Continue to monitor vital signs and Canadian Neurological Scale q 15 minutes</li> <li>• Contact receiving hospital Emergency Department with an update and expected time of arrival</li> </ul> </li> <li>■ Primary IV fluid Normal Saline at _____ mL/hr</li> <li>■ Second IV access: saline lock in same arm if possible</li> </ul>				
<b>Blood Pressure Monitoring and Treatment</b>				
<ul style="list-style-type: none"> <li>■ If SBP is greater than 180 mmHg and/or DBP is greater than 105 mmHg notify MRP and give: Labetalol 10 mg IV over 1-2 minutes (may repeat q10min up to maximum cumulative dose of 150 mg) <b>(NOTE: labetalol contraindicated if severe bradycardia, 2<sup>nd</sup> degree heart block, asthma, physician to cross out if not to be given)</b> <ul style="list-style-type: none"> <li>• If target not achieved within 1 hour of onset of alteplase infusion, notify MRP at GRH</li> </ul> </li> <li>■ If Labetalol is contraindicated or ineffective use alternative antihypertensive: Drug: _____ Dose: _____ mg Route: _____ Frequency: _____</li> <li>■ Avoid hypotension, maintain systolic blood pressure above 140 mmHg</li> </ul>				
<b>Monitor for Angioedema</b>				
<ul style="list-style-type: none"> <li>■ Document state of tongue/oropharynx at 30, 45 and 60 minutes after onset of alteplase infusion</li> <li>■ If facial, tongue and/or pharyngeal angioedema occurs: <b>STOP</b> infusion and patch/notify MRP at Grand River Hospital and begin angioedema treatment immediately as follows:               <ul style="list-style-type: none"> <li>■ DiphenhydrAMINE 50 mg IV over 1-2 minutes</li> <li>■ Ranitidine 50 mg in 50 mL Normal Saline over 15 minutes</li> <li>■ MethylPREDNISolone 80 mg IV in 50 mL Normal Saline over 15 minutes</li> </ul> </li> </ul>				
<b>Monitor for Systemic Bleeding</b>				
<ul style="list-style-type: none"> <li>■ Check puncture sites for bleeding or hematoma</li> <li>■ Apply digital pressure dressings to active bleeding sites</li> <li>■ Monitor urine, stool, emesis or other secretions for blood</li> <li>■ If systemic bleeding occurs STOP infusion and patch/notify MRP at GRH</li> </ul>				
<b>Nausea</b>				
<ul style="list-style-type: none"> <li>■ DimenhyDRINATE 25-50 mg IV x 1 dose PRN</li> <li>■ Ondansetron 4 mg IV x 1 dose PRN</li> </ul>				
<b>Contrast Allergic Reaction Management</b>				
<ul style="list-style-type: none"> <li>■ DiphenhydrAMINE 50 mg IV over 1-2 minutes PRN</li> <li>■ Hydrocortisone 100 mg IV, may repeat X 2 PRN</li> </ul>				

Prescriber Signature: \_\_\_\_\_

Transcriber Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Nurse Reviewer Signature: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_