



Physician Orders ADULT: Alteplase (TPA) IV Ischemic Acute Stroke Care Track Plan EKM

Alteplase (TPA) Phase

Non Categorized

NOTE: completion of Criteria for IV Alteplase required prior to administration and patient should meet IV Alteplase treatment criteria prior to initiation of this order set.(NOTE)*

R Alteplase IV Acute Ischemic Stroke Care Track

Vital Signs

- ☒ Vital Signs w/Neuro Checks
Monitor and Record Resp Rate Monitor and Record Pulse Monitor and Record Blood Pressure, q15min, during alteplase infusion
- ☒ Vital Signs w/Neuro Checks
Monitor and Record Resp Rate Monitor and Record Blood Pressure Monitor and Record Pulse, q15min x 8, (Then) q30min x 12, POST ALTEPLASE INFUSION
- ☒ Vital Signs
Monitor and Record Resp Rate Monitor and Record Blood Pressure Monitor and Record Pulse, q 1 hr x 16, POST ALTEPLASE INFUSION
Comments: Utilize the National Institutes of Health Stroke Scale (NIHSS)
- ☒ Vital Signs
Monitor and Record Temp, q4h(std), Oral or Axillary temp use same route each time.

Activity

NOTE: Keep Flat order is contraindicated in head bleeds or confirmed swelling of the brain. Use the Elevate Head of bed order for these situations.(NOTE)*

- ☐ Keep Flat
Head of bed flat for 24 hours
Comments: OK for PT/OT/ST to evaluate and treat as tolerated.
- ☐ Keep Flat
Head of bed flat for 48 hours
Comments: OK for PT/OT/ST evaluations up to 10 minutes out of bed.
- ☐ Keep Flat
Strict head of bed flat for 24 hours

Patient Care

- ☒ Elevate Head Of Bed
30 degrees
Comments: For head bleeds or confirmed swelling of the brain.
- ☒ INT Insert/Site Care
q4day, large bore, second line
- ☒ Bedside Glucose Nsg
q4h(std), For 48 hr
- ☒ Depression Screening
T;N

Nursing Communication

- ☒ Nursing Communication
T;N, Ensure that Swallowing Screen is completed
- ☒ Nursing Communication
T;N, DO NOT insert: nasogastric tube, for 24 hours from start of alteplase bolus
- ☐ Nursing Communication
T;N, DO NOT insert a foley catheter for 60 minutes post Alteplase (TPA) administration
- ☐ Nursing Communication
T;N, Arterial and peripheral sticks ONLY at compressible sites but should be limited
- ☒ Nursing Communication
T;N, DO NOT administer antiplatelet agents or anticoagulants x 24h after alteplase

Medications

NOTE: Alteplase dose: 0.9mg/kg, IV, STAT. Give 10% of total dose (no more than 9 mg) IV bolus STAT over 1 minute and the remaining 90% (no more than 81mg) of total dose; infuse over 60 minutes.(NOTE)*




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- ☒ alteplase (stroke)
0.81 mg/kg, Injection, IV Piggyback, once, STAT, (infuse over 1 hr)
- ☒ alteplase (stroke-bolus)
0.09 mg/kg, Injection, IV Push, once, STAT, (infuse over 1 min)
- ☒ Sodium Chloride 0.9% (tPA Flush)
50 mL, IV Piggyback, IV Piggyback, once, NOW
Comments: Infuse following alteplase (tPA) at same rate to flush line.
- ☒ Neuro Antihypertensive Acute PRN Meds Plan(SUB)*

Consults/Notifications/Referrals

- ☒ Notify Physician For Vital Signs Of
BP Systolic > 180, BP Diastolic > 105mmHg
- ☒ Notify Physician-Continuing
Notify: MD, Notify For: immediately for evidence of neurological deterioration, evidence of bleeding and/or vital signs and lab outside parameters.
- ☐ Consult Endocrinology Group
Routine, Group: UTMG Endocrinology, Reason for Consult: Hgb A1C greater than or equal to 10

Date	Time	Physician's Signature	MD Number
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***Report Legend:**

DEF - This order sentence is the default for the selected order
 GOAL - This component is a goal
 IND - This component is an indicator
 INT - This component is an intervention
 IVS - This component is an IV Set
 NOTE - This component is a note
 Rx - This component is a prescription
 SUB - This component is a sub phase, see separate sheet
 R-Required order

