

Ischemic Stroke: Transport of the Alteplase Patient



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Background

Ischemic stroke patients that come into the emergency department at SRMH require neurological intervention at a comprehensive stroke center.

- Emergency medical services (EMS) has no standardized protocol for monitoring and management of patients receiving Alteplase during transport.
- Current SRMH policy dictates a registered nurse to go with transport when the patient is receiving Alteplase.

Problem Identification

- A staffing shortage in the ED/CCU may arise when requiring a registered nurse to accompany a patient receiving Alteplase during transport.
- No policy exists identifying which physician (transferring or receiving) is responsible for placing orders during transport.
- *EMS does not stock appropriate medications for blood pressure management

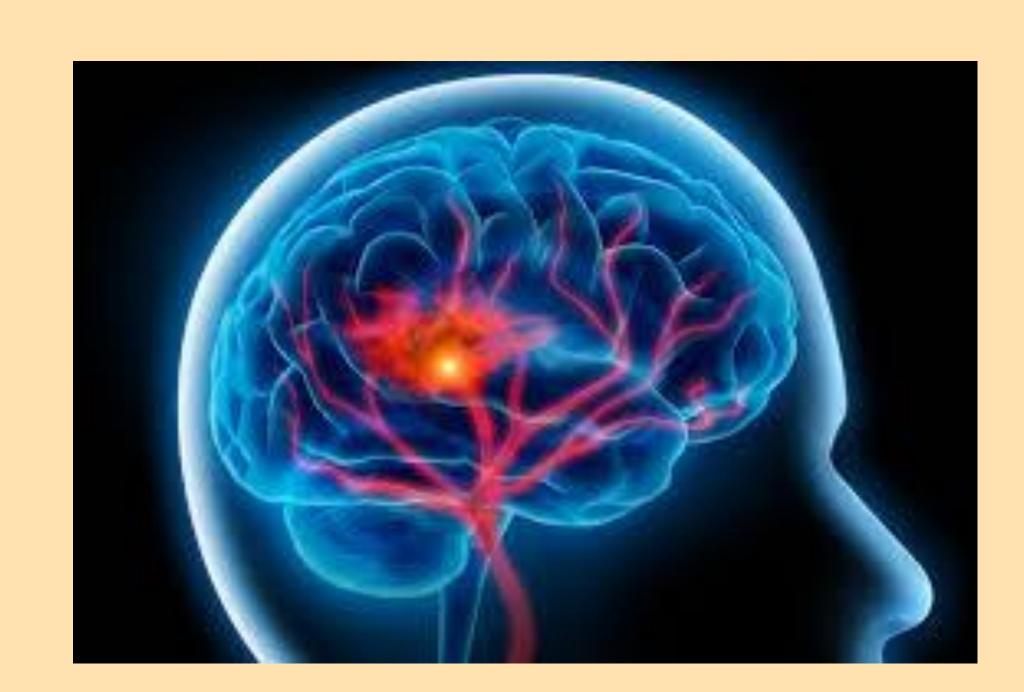


Literature Review & Recommendations

- Developed the following recommendations based on literature review:
- 1. Hemodynamic control and neurological monitoring are critical to improve patient outcomes.
 - Research supports the NIHSS or the Cincinnati Prehospital Stroke
 Scale over the Glasgow Coma Scale
 - ❖Drug of Choice: Labetalol or Nicardipine to stabile systolic blood pressure < 180mmHg and diastolic < 105mmHg.</p>
- 1. Transport may occur without RN for EMS agencies following EBP protocols
- Recommendations presented to the Stroke Core Team at SRMH.
 - Emergency Department, Critical
 Care Unit Clinical Nurse Specialists.
 - Stroke Medical Director
 - Cath Flow (Alteplase)
 Representative
 - Stroke Coordinator
 - Stroke Unit Educator
 - *Emergency Department MD

Results and Implications

- Presented recommendations to the Stroke Work Team at SRMH.
 - Stroke Core Team
 - *EMS Representative
 - Physical Therapy Leader
 - Radiology Lead
 - Laboratory Manager



- *EMS personnel are qualified to monitor, evaluate and deliver appropriate therapies without a registered nurse present.
 - Collaborate and develop education and protocols that meet evidence-based guidelines.
 - Interviews with statewide stroke coordinators and specialists to compare policies and procedures.
- Physician teams working on process for orders during transport.
- * Moving forward, transport of patients requiring Alteplase will not require utilization of hospital resources.
- Transition of patient care will include consistent care that follows evidence-based guidelines.