

PHYSICIAN'S PREPRINTED ORDERS

TITLE:

PROTOCOL FOR IN-HOUSE STROKE ACTIVATION

The Stroke Activation Protocol will be initiated for all patients in hospital that show evidence of stroke-like symptoms and last known well time is less than 8 hours unless an order is written in the chart indicating "Patient is Comfort Measures". If patient is DNR/DNI the option to activate protocol is at the discretion of the Primary Care Physician.

Vital Signs (initially and as indicated) Assess patient for:

- Blood pressure, Heart rate, Respiratory rate/depth, Temperature, level of responsiveness.
- O2 Saturation
- Patent IV access
- Cardiac Monitor
- Stroke-like symptoms

This is a partial list of most commonly seen symptoms:

- Unilateral weakness, sensory loss &/or paralysis
- Facial droop
- o Language deficit, aphasia, slurred speech
- Unsteady gait
- o Visual disturbances such as visual field cut, loss of vision in one or both eyes, double vision
- o **Sudden onset** of ataxia, nausea, vomiting, vertigo (indicative of cerebellar stroke)

Nursing

IV Access

If no IV access insert saline lock with at least 20 g IV catheter in antecubital space.

Diagnostics

- Accucheck blood sugar
- Plain head CT, ensure CT tech is aware that this is for possible stroke and have radiologist call ordering physician with results
- Order following labs if not completed today: CBC, Chem 13, PT, PTT,INR.

Respiratory

O2 to keep oxygen saturations > 90%

Ongoing Assessment

- Obtain baseline NIHSS score
- Evaluate inclusion criteria for possible thrombolytics
- Observe for changes in neurological status

Reference: Adams, H. et al(2007) Guidelines for the early management of adults with ischemic stroke. A guideline from the American Heart Association/American Stroke Association.

| Signature | | |
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| | | <u> </u> |
| | | Patient Identification |
| Date | Time | |
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| *POS* EIMC 603938 June 2012 | | |