



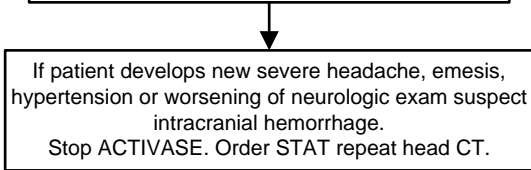
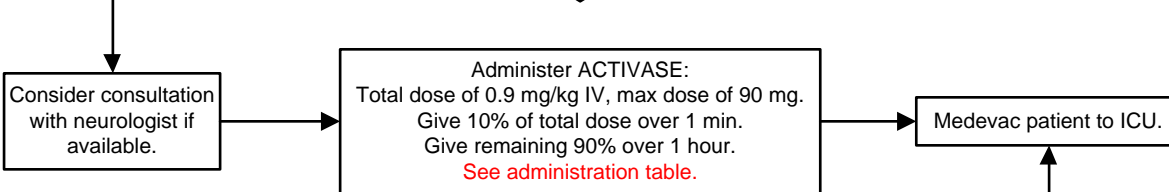
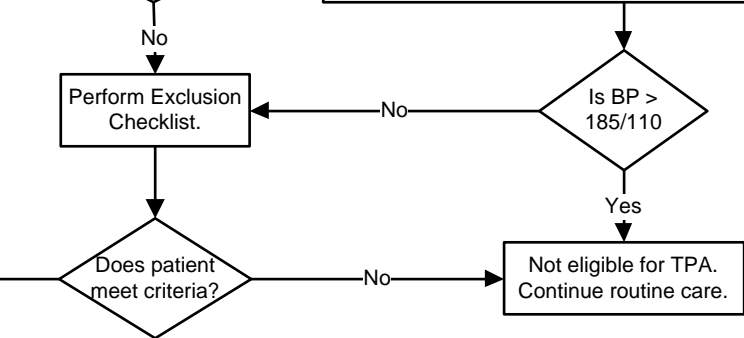
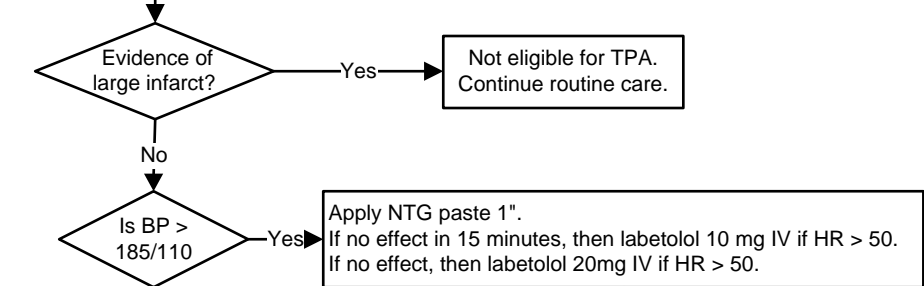
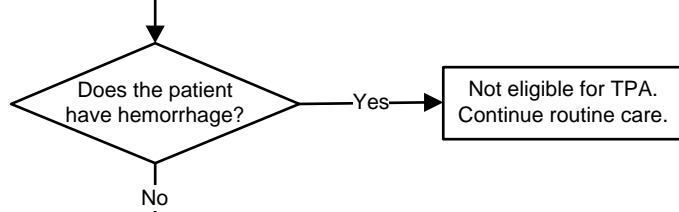
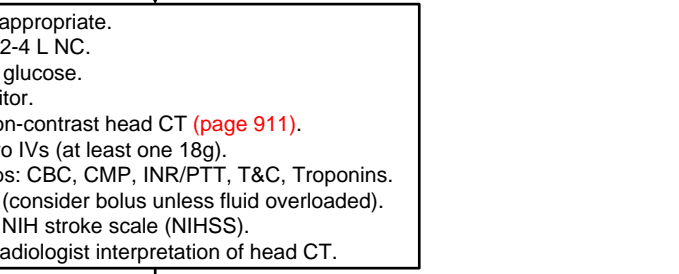
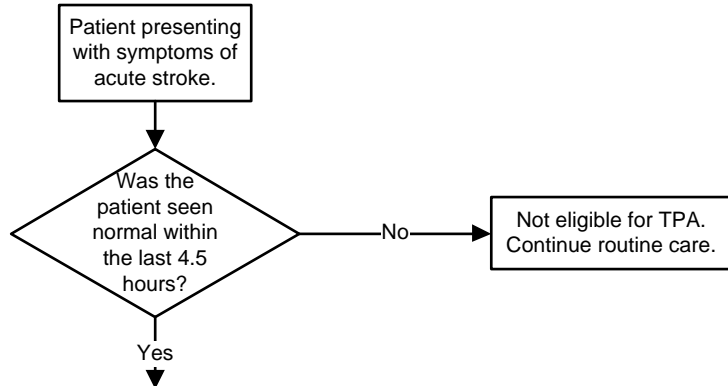
Exclusion criteria

- Any hemorrhage on CT
- BP > 185/110
- NIHSS* < 4 or rapidly improving exam
- Hx suggestive of SAH even with normal CT
- INR > 1.7 or on heparin with elevated PTT
- Platelets < 100,000
- Seizure at onset of symptoms
- History of any of the following:
 - intracranial hemorrhage
 - intracranial Neoplasm or AVM
 - major surgery <14 days
 - head trauma in last 3 months
 - arterial puncture at non-compressible site < 7 days
 - GI or GU hemorrhage <21 days
 - LP in last 24 hrs
- Glucose <50 or >400 (may continue if symptoms persist after glucose corrected)
- Presumed septic emboli

Additional 3-4.5 hr Exclusion Criteria

- age >80 yrs old
- NIHSS* >25
- Prior stroke + DM
- anticoagulation regardless of IHR

Ref: 1). FCASS 3 trial. Lancet Neurol 2009; 8: 1095. 2). Uptodate .www.uptodate.com/contents/reperfusion-therapy-for-acute-stroke>
*NIH Stroke Scale (NIHSS) calculator: <www.mdcalc.com/nih-stroke-scale-score-nihss>



This guideline is designed for the general use of most patients but may need to be adapted to meet the special needs of a specific patient as determined by the medical practitioner.
Approved by MSEC 6/22/11.
If comments about this guideline, please contact Tara_Lathrop@ykhc.org.