Post IV t-PA Protocol for Intracranial Hemorrhage

Suspicion of ICH (neurologic deterioration, new headache, acute hypertension, or nausea and vomiting)

YES

Discontinue IV t-PA infusion

STAT blood draw: PT, PTT, Platelet count, fibrinogen, and type and cross

Prepare for administration of: 6-8 units of cryoprecipitate and 6-8 units of platelets

End transfusion process

NO

Is hemorrhage present?

YES

Consult neurosurgeon and alert to ICH

Administer 6-8 units of cryoprecipitate followed by 6-8 units of platelets

Consider second CT (to assess for ICH growth if any) and consider repeat blood work (to re-assess coagulation status)

Consensus decision regarding surgical and/or medical therapy

NO

STAT Head CT scan (non contrast)

If available, consult hematologist and alert to current coagulation status


Prepared by UHS Stroke Committee
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