SAN JUAN HOSPITAL TELESTROKE

MD PROCEDURE

A.	PATIENT ASSESSMENT	
		ABCs.
		Establish history (brief).
		PMH and medications (brief)include prior disability.
		Perform a brief neurologic exam.
		Review thrombolytic inclusion and exclusion with the patient and family.
		BP Control.
		If the patient is likely a thrombolytic candidate:
		Give Labelatol 5-10 mg IV Q 15 mins. prn for SBP> 185 or DBP > 110 (not to exceed a total of 150 mg). DO NOT USE A CONTINUOUS IV DRIP.
	For Ischemic Stroke ONLY: If the patient is <u>not</u> a thrombolytic candidate, avoid treating BP.	
		Obtain consent.
B.	VIDEOCONFERENCE	
		Obtain consent for teleconference if not already done Present case to consulting physician. Introduce patient and family. Help consultation physician facilitate the history and physical.
C.	t-PA CONSENT	
		Obtain t-PA consent (see form). Sign t-PA order set. Sign post-t-PA orders.