



Title	Greater Manchester Stroke Thrombolysis
Description	Agreed criteria between all 3 GM HASU's
Applicable to	All trusts involved within the Greater Manchester and East Cheshire pathway involved in thrombolysis
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Date/Version	Reason for Change	Changes made
20/07/17 (V1.0)	N/A	First Draft

Standard Operating Procedure (SOP):

Greater Manchester Stroke Thrombolysis (V1.0)

1. Aims and objectives

1.0 The purpose of this SOP is to consolidate best evidence-based guidance and inform timely, safe and appropriate use of IV tPA in acute ischaemic stroke throughout GM.

1.1 This policy describes the processes involved in urgent assessment of eligibility for IV alteplase.

2. Contributors

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3. Criteria

3.0 The requirement for the duty consultant to attend in person to supervise thrombolysis when off-site (e.g. overnight) is no longer mandated. The duty consultant may supervise thrombolysis when off-site using telemedicine (or over the telephone), which will include reviewing the thrombolysis checklist and the brain imaging.

4.0 Checklist

Thrombolysis checklist

INCLUSION CRITERIA – MUST ANSWER YES TO ALL OF THE FOLLOWING

Aged ≥ 18 years with symptoms of acute stroke	
Onset within last 4.5 hours*	
Measurable deficit on NIHSS	
Absence of haemorrhage or stroke mimic on baseline CT	

ABSOLUTE EXCLUSION CRITERIA – MUST ANSWER NO TO ALL OF THE FOLLOWING

Systolic BP > 185 and/or diastolic BP > 110	
Symptoms and signs suggestive of a subarachnoid haemorrhage	
Any evidence of active bleeding	
History of any intracranial haemorrhage	
Arterial puncture at non-compressible site within 7 days	
Recent lumbar puncture within last 7 days	
Known or strongly suspected bacterial endocarditis	
Known or confirmed aortic dissection if suspected	
Major head trauma; brain or spinal surgery within last 3 months	
Platelet count < 100 x 10 ⁹ /l if high-level of clinical suspicion	
Heparin or newer oral anticoagulant agent [∞] within last 48 hours; or INR > 1.7 on warfarin	

RELATIVE EXCLUSION CRITERIA - CONSIDER ON CASE-CASE BASIS

Pregnancy	
Stroke within last 3 months	
Major surgery or non-head trauma within last 2 weeks	
Brain tumour, cerebral aneurysm or AVM #	
Gastro-intestinal, urinary or gynaecological haemorrhage within last 21 days	

* proceed with caution between 3-4.5h window if age > 80y, NIHSS > 25 and/or early infarct change > one third of the MCA territory

[∞] direct thrombin inhibitors (e.g. dabigatran) or factor Xa inhibitors (e.g. rivaroxaban)

may consider if underlying CNS lesions at low-risk of bleeding such as small unruptured aneurysms (< 10mm) or benign tumours with low vascularity