

Patient Name: _____
 Date of Birth: _____ Age: _____
 Date of Transfer: _____ NIHSS Score: _____ Weight: _____ (kg)
 Transfer Service Name: _____
 t-PA (alteplase) Dosing For Ischemic Strokes: Bolus Dose, Date, & Time: _____
 (in mg) Infusion Dose, Date & Time: _____
 NS Infusion Dose, Date & Time: _____
 Form Origination Date: 12/4/15 Version: 2 Version Date: 7/2018

Acute Ischemic & Hemorrhagic Stroke Transfer Flowsheet

Please utilize this form when transferring patient to another facility post-tPA administration

Document vital signs **and** neuro checks (Full GCS & RACE) q15 min x 2 hours, q30 min x 6 hours, & q1 Hour x 16 hours from bolus dose.

DATE								
TIME								
HR								
BP								
RR								
SPO ₂								
GCS	Eyes Open: 4=Spontaneous, 3= To voice, 2=To pain, 1=None							
	Verbal: 5=Oriented, 4=Confused, 3=Inappropriate words, 2=Incomprehensible words, 1=None							
	Motor: 6=Obeys, 5=Localizes, 4=Withdraws, 3=Flexion, 2=Extension, 1=None							
RACE	Facial Palsy: 0=Absent, 1=Mild, 2=Moderate to severe							
	Arm Motor Function: 0=Normal to mild, 1=Moderate, 2=Severe							
	Leg Motor Function: 0=Normal to mild, 1=Moderate, 2=Severe							
	Head & Gaze Deviation: 0=Absent, 1=Present							
	Aphasia: (ask patient to 'close your eyes', 'make a fist', and evaluate obedience) 0=Both correct, 1=1 task correct, 2=Neither task correct							
Agnosia: (show patient the paretic arm and ask 'Whose arm is this' & 'Can you pick up both arms and clap?'; evaluate limb and functional impairment recognition) 0=Recognition, 1=Recognition of one, 2=No recognition								
Total:								

Notes: _____

Paramedic Signature: _____ Date: _____

Receiving Hospital Signature: _____ Date: _____

GENERAL CARE GUIDELINES

Blood Pressure Goals for t-PA patient: SBP < 180mmHg and DBP < 105mmHg

Vital Sign Monitoring:

Monitor Blood Pressure, HR, RR, sPO₂, GCS, and RACE exam - Starting at time of bolus dose - Every 15 min x 2 hours, then every 30 minutes x 6 hours, then every 1 hour x 16 hours (Total of 24 hours)

Patient Positioning:

Ischemic stroke patients should be transported with the head of stretcher 30⁰ or less whenever possible.

(Many ischemic stroke patients rely on Cerebral Perfusion Pressure (CPP) for collateral blood flow to affected tissues. This can be affected by the patient's position; i.e.- head 0⁰ - 30⁰ can increase CPP, and head 30⁰ - 90⁰ can decrease CPP.)