

Nursing

Vital Signs (Selection Required)

<input checked="" type="checkbox"/> Vital signs - T/P/R/BP	STAT, Per unit protocol Per protocol, within 15 minutes prior to the start of the tenecteplase (thrombolytic) administration, every 15 minutes for 2 hours, then every 30 minutes for 6 hours, then every 1 hour for 16 hours POST tenecteplase (thrombolytic) administration. For Temp, check every 4 hours.
<input checked="" type="checkbox"/> Neurological assessment	STAT, Once Assessment to Perform: Perform within 15 minutes prior to start of tenecteplase (thrombolytic) administration.
<input checked="" type="checkbox"/> HM Stroke Change Scale (HMSCS)	STAT, Every 15 min, Perform NIH Stroke Scale if/when an increase of 2 or more points in the HM Stroke Change Scale and notify provider. , Every 15 minutes for 2 hours, then every 30 minutes for 6 hours, then every 1 hour for 16 hours POST tenecteplase (thrombolytic) administration.

Activity (Single Response)

<input type="checkbox"/> Strict bed rest	Routine, Until discontinued, Starting S
<input type="checkbox"/> Bed rest with bathroom privileges	Routine, Until discontinued, Starting S Bathroom Privileges: with bathroom privileges

Nursing

<input checked="" type="checkbox"/> NIH Stroke Scale	STAT, Now then every 24 hours After tenecteplase (thrombolytic) administration and 24 hours after administration.
<input checked="" type="checkbox"/> NIH Stroke Scale	Routine, As needed, Starting S Perform NIH Stroke Scale for any neurologic deterioration
<input checked="" type="checkbox"/> No NSAIDs INcluding aspirin	STAT, Until discontinued, Starting S For 24 Hours Reason for "No" order: Contraindicated with tenecteplase (thrombolytic) administration
<input checked="" type="checkbox"/> No anticoagulants INcluding UNfractionated heparin	STAT, Until discontinued, Starting S For 24 Hours Reason for "No" order: Contraindicated for tenecteplase (thrombolytic) administration
<input checked="" type="checkbox"/> No anti-platelet agents INcluding aspirin	STAT, Until discontinued, Starting S For 24 Hours Reason for "No" order: Contraindicated for tenecteplase (thrombolytic) administration
<input checked="" type="checkbox"/> Post Tenecteplase (Thrombolytic): Maintain blood pressure and Notify Physician for Vitals (Selection Required)	"And" Linked Panel
<input checked="" type="checkbox"/> Post Tenecteplase (Thrombolytic): Maintain blood pressure	Systolic greater than or equal to (mmHg): Systolic less than or equal to (mmHg): 180 Diastolic greater than or equal to (mmHg): Diastolic less than or equal to (mmHg): 105 MAP Range (mmHg):
<input checked="" type="checkbox"/> Notify Physician for vitals:	STAT, Until discontinued, Starting S Temperature greater than: 100.3 Temperature less than: Heart rate greater than (BPM): Heart rate less than (BPM): Respiratory rate greater than: Respiratory rate less than: SpO2 less than: 94

[X] Avoid punctures, ABG, NGT, Central Lines, Foley Catheters or other invasive procedures for 24 hours post tenecteplase (thrombolytic) unless essential	STAT, Until discontinued, Starting S For 24 Hours
[X] Nurse to accompany patient for all transport for first 24 hours	STAT, Until discontinued, Starting S For 24 Hours
[X] No PT or OT for 12 hours post tenecteplase (thrombolytic) administration	STAT, Until discontinued, Starting S
[X] Monitor all recently discontinued arteriopuncture and venipuncture sites for bleeding	STAT, Until discontinued, Starting S Careful monitoring of puncture sites once fibrinolytic action begins.
[X] No IM injections for 24 hours post tenecteplase (thrombolytic) administration	STAT, Until discontinued, Starting S
[X] Apply pressure	STAT, Once Specify location: Site of oozing, bleeding, or bruising If oozing, bleeding, or bruising occurs, apply digital pressure until hemostasis is achieved and notify the ordering physician.
[X] Place sequential compression device	"And" Linked Panel
[X] Place/Maintain sequential compression device continuous	Routine, Continuous

Finger Stick Blood Glucose (FSBG) Monitoring

[] Bedside glucose	Routine, Every 4 hours Notify MD for blood glucose LESS THAN 70 mg/dl or GREATER THAN 180 mg/dl
[] Bedside glucose	Routine, Every 6 hours Notify MD for blood glucose LESS THAN 70 mg/dl or GREATER THAN 180 mg/dl

Notify

[X] Notify Physician for intracerebral hemorrhage, internal bleeding, facial edema, or allergic reaction is suspected (e.g., neurologic status worsens greater than 2 points on NIHSS scale or severe headache develops)	STAT, Until discontinued, Starting S
[X] Notify responsible provider if IV access is urgently needed	STAT, Until discontinued, Starting S

Medications

Tenecteplase (Selection Required)

[Error! Hyperlink reference not valid.](#)

URL:

"file://\appt1\EpicAppProd\Restricted\OrderSets\Tenecteplase for Stroke Dosing Card.pdf"

[X] tenecteplase (TNKASE) injection	0.25 mg/kg, intravenous, once, For 1 Doses Administer over 5 seconds. Flush with sodium chloride 0.9% before and after tenecteplase administration.
-------------------------------------	--

Reason for Late Initiation of Thrombolytic Therapy

Per Stroke Core Measures criteria: tenecteplase (thrombolytic) needs to be ADMINISTERED within 60 minutes of arrival and within 4.5 hours from last known well, otherwise a reason for extending initiation time is required.

[] Reason for late initiation of IV thrombolytic	Routine, Once Reason for extending the initiation of IV Thrombolytics:
---	---

Hypertensive Urgency - Once Orders (Pre tenecteplase) (thrombolytic)

<input checked="" type="checkbox"/> labetalol (NORMODYNE, TRANDATE) injection - Select an alternative agent if heart rate is LESS than 55 BPM	10 mg, intravenous, once, For 1 Doses To be administered before tenecteplase (thrombolytic) is administered. Systolic Blood Pressure GREATER than 185 mmHg and/or Diastolic Blood Pressure GREATER than 110 mmHg. Administer at 2 mg/minute. Select an alternative agent if heart rate is LESS than 55 BPM BP & HR HOLD parameters for this order: ONCE or PRN Orders - No Hold Parameters Needed Contact Physician if:
---	--

<input type="checkbox"/> hydrALAZINE (APRESOLINE) injection - Use alternative therapy if patient is tachycardic (GREATER than 100 BPM)	10 mg, intravenous, once, For 1 Doses To be administered before tenecteplase (thrombolytic) is administered. Systolic Blood Pressure GREATER than 185 mmHg and/or Diastolic Blood Pressure GREATER than 110 mmHg. Use alternative therapy if patient is tachycardic (GREATER than 100 BPM) BP HOLD parameters for this order: ONCE or PRN Orders - No Hold Parameters Needed Contact Physician if:
--	---

Hypertensive Urgency - PRN (Post tenecteplase) (thrombolytic)

<input checked="" type="checkbox"/> labetalol (NORMODYNE, TRANDATE) injection - Select an alternative agent if heart rate is LESS than 55 BPM	10 mg, intravenous, every 6 hours PRN, high blood pressure, Systolic Blood Pressure GREATER than 180 mmHg and/or Diastolic Blood Pressure GREATER than 105 mmHg To be administered AFTER tenecteplase (thrombolytic) has been administered. Administer at 2 mg/minute. Select an alternative agent if heart rate is LESS than 55 BPM. BP & HR HOLD parameters for this order: ONCE or PRN Orders - No Hold Parameters Needed Contact Physician if:
---	---

<input type="checkbox"/> hydrALAZINE (APRESOLINE) injection - Use alternative therapy if patient is tachycardic (GREATER than 100 BPM)	10 mg, intravenous, every 6 hours PRN, high blood pressure, Systolic Blood Pressure GREATER than 180 mmHg and/or Diastolic Blood Pressure GREATER than 105 mmHg To be administered AFTER tenecteplase (thrombolytic) has been administered. Use alternative therapy if patient is tachycardic (GREATER than 100 BPM) BP HOLD parameters for this order: ONCE or PRN Orders - No Hold Parameters Needed Contact Physician if:
--	---

Hypertensive Urgency - niCARDipine (CARDENE) IV infusion

<input checked="" type="checkbox"/> niCARDipine (CARDENE) IV infusion	2.5-15 mg/hr, intravenous, titrated
---	-------------------------------------

Labs

Type and Screen

<input type="checkbox"/> Type and screen	STAT For 1 Occurrences
--	------------------------

Imaging

CT - STAT

<input type="checkbox"/> CT Stroke Brain Wo Contrast	STAT, 1 time imaging, Starting S at 1:00 AM For 1
<input type="checkbox"/> CT Stroke Brain Wo Contrast	STAT, Conditional Frequency For 1 If acute deterioration in neurological condition worsens post tenecteplase (thrombolytic) administration
<input type="checkbox"/> CTA Stroke Head W Wo Contrast	STAT, 1 time imaging, Starting S at 1:00 AM For 1 Neuro deficit < 24 hours
<input type="checkbox"/> CTA Stroke Neck W Wo Contrast	STAT, 1 time imaging, Starting S at 1:00 AM For 1

CT OR MRI - To be performed between 22 and 26 hours AFTER tenecteplase (thrombolytic) administration and PRIOR to starting antiplatelets or anticoagulants (Single Response)
Select CT if imaging procedure will be performed during after hours

<input type="checkbox"/> CT POST THROMBOLYTIC Brain wo contrast	Routine, 1 time imaging, Starting S at 1:00 AM For 1 Perform between 22 and 26 hours AFTER tenecteplase (thrombolytic) administration and PRIOR to starting antiplatelets or anticoagulants. Confirm with nurse when tenecteplase (thrombolytic) administration was completed and schedule CT Head Wo Contrast between 22 and 26 hours after this time.
<input type="checkbox"/> MR POST THROMBOLYTIC BRAIN wo contrast	Routine, 1 time imaging, Starting S at 1:00 AM For 1 Perform between 22 and 26 hours AFTER tenecteplase (thrombolytic) administration and PRIOR to starting antiplatelets or anticoagulants. Confirm with nurse when tenecteplase (thrombolytic) administration was completed and schedule MRI Stroke Brain Wo Contrast between 22 and 26 hours after this time.

Respiratory

Respiratory Therapy

<input checked="" type="checkbox"/> Oxygen therapy	STAT, Continuous Device: Nasal Cannula Rate in liters per minute: 2 Lpm Device 2: Device 3: Titrate to keep O2 Sat Above: Other (Specify) Specify titration to keep O2 Sat (%) Above: 94 Indications for O2 therapy: Device:
--	--

Consults

For Physician Consult orders use sidebar

Physician Consults

<input checked="" type="checkbox"/> Consult Neurology	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated?
<input type="checkbox"/> Consult Physical Medicine Rehab	Reason for Consult? Patient/Clinical information communicated? Patient/clinical information communicated?

Consults

<input type="checkbox"/> Consult to Speech Language Pathology	Routine, Once Reason for consult: Dysphagia,Dysarthria Reason for SLP? If for dysphagia, may not assess the patient until at least 2 hours past the completion of the tenecteplase (thrombolytic) administration.
<input checked="" type="checkbox"/> Consult to PT eval and treat	Reasons for referral to Physical Therapy (mark all applicable): Other Specify: Stroke Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation(if values are very abnormal): Weight Bearing Status:
<input checked="" type="checkbox"/> Consult to OT eval and treat	Reason for referral to Occupational Therapy (mark all that apply): Other Specify: Stroke Are there any restrictions for positioning or mobility? Please provide safe ranges for HR, BP, O2 saturation(if values are very abnormal): Weight Bearing Status:

