

## Organizations' Official Statements/Guidelines on IV tPA Use:

*What Do They Suggest is the  
Emergency Medicine  
Standard of Care?*

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## Emergency Medicine Associates

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Chairman  
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## Disclosures

- All past advisory board or speakers' bureau activities have expired within the past year

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## Global Objectives

- Maximize patient outcomes
- Utilize health care resources well
- Optimize evidence-based medicine
- Enhance ED practice

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## Case Presentation

- 52 year old male
- Dysarthria and right-sided weakness
- Sudden onset without progression
- BGM 80
- VS: HR 85 BP 185/95 RR 16

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## Case Presentation...

- Minimal dysarthria and slight dominant right hand/leg weakness
- Chairman of Plastic Surgery
- Hx: Hypertention, smoker
- FH: CAD and CVA
- No evidence trauma or toxicity
- ECG NSR without evidence of AMI or arrhythmia

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## CVA Management

- What would you do?
- What did the EP do?

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## ACEP tPA Policy

- tPA may be efficacious therapy when used incorporating the guidelines established by the NINDS Trial
- Commitment of hospital administration, neurology, neurosurgery, ED, radiology and laboratory to ensure the systems necessary for safe use

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## What Policies/Statements From Other EM Organizations Say?

- Society of Academic Emergency Medicine 2003 Insufficient Data for SOC, Barriers, Research
- Canadian Assoc of Emergency Physicians 2001 CT Interpretations, Cleveland, Time to Rx
- American Academy of Emergency Medicine Not SOC-Selection Bias

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## What About Non-EM Organizations?

- NINDS 2002/2005
- AHA 2000/2005
- ACCP 2005
- ACCS 2004
- AAN,ASA 2002

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## Additional Literature?

- NINDS Reanalysis, subanalysis
- Additional Prospective Data
- Data Registry Reports
- Meta Analysis
- Cochrane Collaboration

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## Impact of Guidelines/Policies

- Education and Training
- Litigation
- Resource Support
- System Development
- Public Notification
- Stroke Center Certification

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## What Other Issues Do the Guidelines/Policies Address?

- Designated Stroke Teams/Systems
- Use of Clinical Pathways/Protocols
- Training Dedicated Stroke Nurses
- Time to CT and Interpretation
- Use of Aspirin
- BP Control
- Prevention Recurring Stroke

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## What Other Issues Do the Guidelines/Policies Address??

- Prevention of UTI, skin ulcers, aspiration pneumonia, DVT and PE
- Early Rehabilitation and Physical Therapy
- Lack of Efficacy Heparin
- Blood Glucose Control
- Lack of Efficacy Neuroprotective Agents

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## Where Do I Believe the Guidelines/Policies Leave Us?

- tPA should be considered for appropriate patients when the NINDS criteria for safe use can be achieved
- Patients and families should know the risks/benefits of tPA before it is given
- Careful documentation of the medical record is necessary for every case

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## Case Presentation

- So what happened?

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# Questions?

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