

- ST. JOSEPH MERCY HOSPITAL
- SAINT JOSEPH MERCY SALINE HOSPITAL
- SAINT JOSEPH MERCY LIVINGSTON HOSPITAL

Emergency Observation Center Orders Transient Ischemic Attack (TIA)

NOTE: These orders will be initiated unless crossed out.

Diagnosis: TIA **Circulation involved:** anterior posterior unsure

Initiate Standard EOC Orders for Transient Ischemic Attack (TIA)

Vital signs: every 4 hours other _____

Neurological assessment every 4 hours

Oxygen: nasal cannula at _____ L/min

IV: IID/ Saline lock

IV _____ at _____ mL/hour

Additional Medications:

Aspirin enteric-coated 325mg PO daily (unless patient with aspirin allergy)

Only order regular medications that are *absolutely necessary* for the next 24 hours (must include name, dose, route, and schedule)

Neurology Consult: Ann Arbor Neurology **Reason for consult:** TIA

Labs:

Cardiac Lipid Profile

Hypercoaguable state profile (Antithrombin III, Protein C, Protein S, Factor V Leiden, Prothrombin 20210 mutation, anticardiolipin antibodies, lupus anticoagulant) - to be done on patients age less than 50 years without stroke risk factors (Afib, longstanding DM or HTN)

Hemoglobin A1C: Order for **ALL** diabetic patients

Diagnostic Evaluation:

Vascular Evaluation (choose one):

Anterior circulation TIA: Carotid Duplex

Posterior circulation TIA: CTA neck (most patients) **OR**

MRA neck with contrast (if renal insufficiency or contrast allergy)

Cardiac Evaluation (to be done if vascular evaluation negative):

Standard Echocardiogram (2D Echo) – for patients greater than 65 years, or 55-65 years with any vascular risk factors (DM, HTN, chol, smoking)

Transesophageal echocardiogram (TEE) – for patients less than 55 years, or 55-65 years without any vascular risk factors

Mechanical Heart Valve:

Transesophageal echocardiogram (TEE)

Print attending name: _____

Date: _____

MD/DO Attending signature: _____

Date: _____

Resident/AHP signature: _____

Date: _____