**GUIDELINE FOR STROKE CARE: ISCHEMIC STROKE ADMISSION**

***● MANDATORY  OPTIONAL \*CMS STROKE CORE MEASURE***

**1. Admit to \_\_\_\_\_ ● Allergies: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**2. Diagnosis: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3. PMH:  Hypertension  Hyperlipidemia  Diabetes  Atrial Fib. Smoking**

**4. Condition:  Guarded  Critical  Serious  Stable**

**5. Nursing: ● Vital Signs ( HR, BP, Sp02, RR) q4 hours**

● **NeuroChecks :** NIHSS on arrival from ED and at 12 and 24 hours post admission.

Notify provider for NIHSS increase of 2 points or more

● **Supplemental oxygen** to maintain Sp02 > 94%

● **Place on telemetry until discharge**

**● NPO until cleared by Nursing Dysphagia Screen. Call for diet when screened and cleared**

**● Head of bed 30 degrees**

** Bedrest for 24hrs then up with assist  Bedrest with Bathroom with assist**

** Fingerstick blood glucose ac and hs. Call if over 150mg/dl**

** IV NS @\_\_\_cc/hr  IV NS TKO  Saline lock**

** Foley catheter only if unable to mobilize or void in pan/urinal.**

 **VTE prophylaxis: intermittent pneumatic compression devices bilateral legs\***

**6. Blood Pressure Management:** BP must be kept below 220/110 for 24 hours. Call provider

if unable to maintain below 220/110.

**7. Medication:**

** Tier 1 BP :** Labetolol 10 mg IV over 2 minutes for BP >220/110 and HR above

60bpm. May repeat every 10 minutes up to 300mg/24 hrs.

●If HR drops below 60, notify provider

● If no response after 3 sequential doses, notify provider

 **Tier 2 BP**: Hydralazine 10 mg IV every 6 hours for BP >220/110 or if unable to use

Labetolol due to HR < 60.

●Recheck BP in 30 minutes. If BP still >220/110, notify provider

 Acetaminophen 650 mg po/pr q4hrs prn oral T > 100.4 F (38.0 C)

 Atorvastatin \_\_\_mg po @ qhs once taking po

 Initiate patients home statin medication routine once taking po

 Aspirin 325 mg po/pr now and daily \*

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**8. Labs**

 Hgb A1c for all diabetics

 CBC

 Metabolic panel:\_\_\_\_\_\_\_\_\_\_\_

 PT/PTT/INR

 ESR

 Urinalysis

● Fasting lipid panel\* ( LDL goal , 70)

 Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**9. Diagnostics and Imaging**

** Transthoracic Echocardiogram**

** Carotid Ultrasound**

**12 Lead EKG**

** Other:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**10. Consultations:**

** Neurology**

** Physical Therapy \***

** Occupational Therapy\***

** Speech therapy\***

** Diabetic educator**

** Stroke Education on patient’s stroke risks, stroke signs, use of 9-1-1, medications and follow-up appointments.\***

**11. Additional orders:**

**Verbal orders RBAV:** (RN print) (RN sign)

Date/time: (Provider):

**Provider (print)**  Date/time:

(sign)