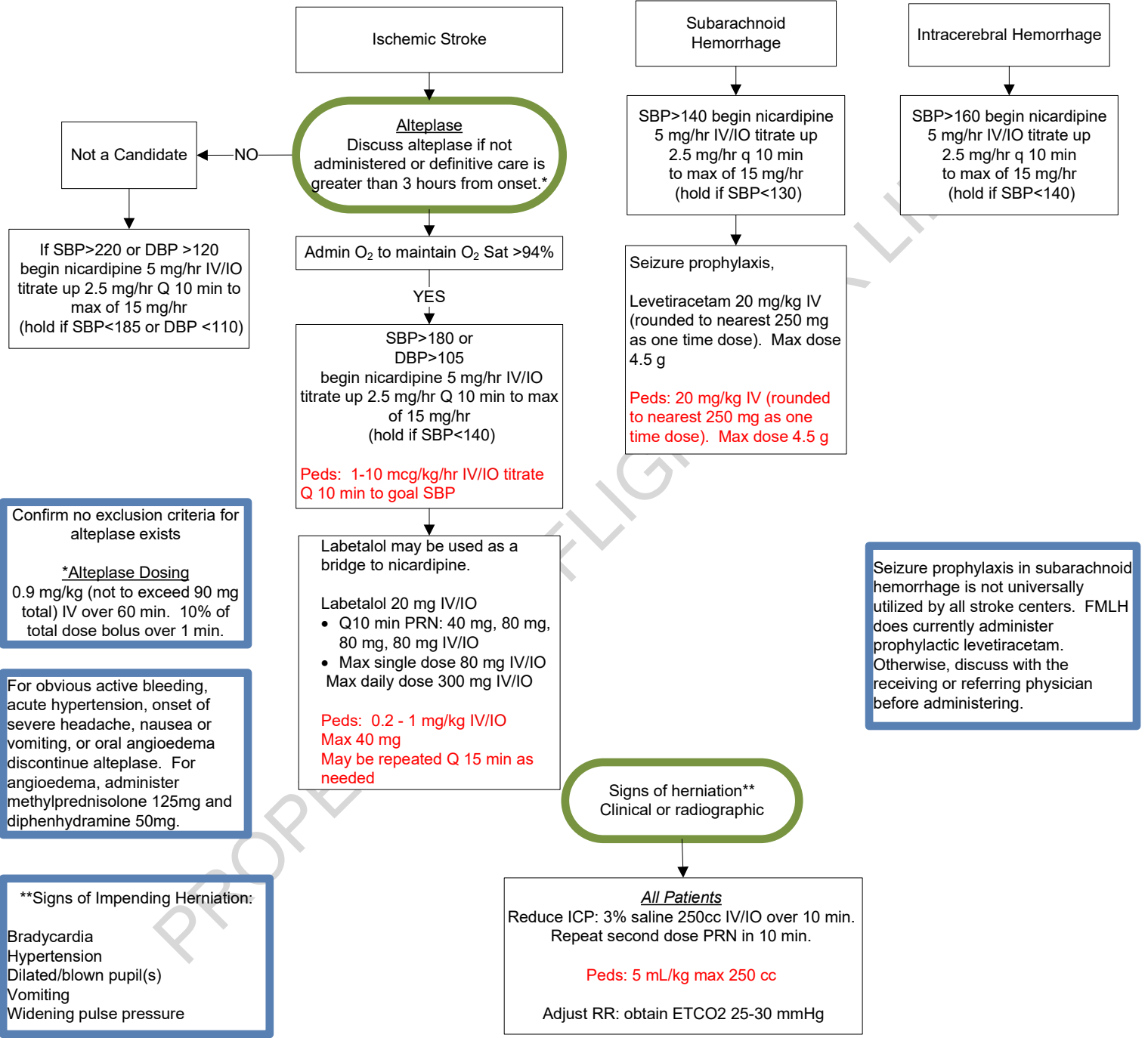




Stroke



Confirm no exclusion criteria for alteplase exists

***Alteplase Dosing**
0.9 mg/kg (not to exceed 90 mg total) IV over 60 min. 10% of total dose bolus over 1 min.

For obvious active bleeding, acute hypertension, onset of severe headache, nausea or vomiting, or oral angioedema discontinue alteplase. For angioedema, administer methylprednisolone 125mg and diphenhydramine 50mg.

****Signs of Impending Herniation:**

Bradycardia
Hypertension
Dilated/blown pupil(s)
Vomiting
Widening pulse pressure

Seizure prophylaxis in subarachnoid hemorrhage is not universally utilized by all stroke centers. FMLH does currently administer prophylactic levetiracetam. Otherwise, discuss with the receiving or referring physician before administering.

This guideline does not substitute for sound clinical judgment.

Approved by: DocuSigned by:
Nick Lehouillier
11/14/2025 | 9:26:28 AM CST
Nick Lehouillier, RN, Chief Flight Nurse
Signed by:
William B. Weir
11/14/2025 | 9:52:16 AM CST
William B. Weir, MD, Medical Director

Reviewed 9/10/25 Revised 9/10/25 Posted 11/26/25 Standards and Practice Committee

Reference:
https://www.ahajournals.org/doi/full/10.1161/STR.000000000000158?rfr_dat=cr_pub++0pubmed&url_ver=Z39.88-2003&rfr_id=ori%3Arid%3Aacrossref.org
https://www.uptodate.com/contents/levetiracetam-drug-information?search=levetiracetam%20dosing&source=panel_search_result&selectedTitle=1%7E102&usage_type=panel&kp_tab=drug_general&display_rank=1