

Colorado Stroke Alliance

To: Colorado Stroke Alliance Hospitals
From: Colorado Stroke Alliance

Date: July 2009

Topic: 4.5 hour window for TPA

Background: In July 2009 the Colorado Stroke Alliance (CSA) received the following question:

What are hospitals doing at this point with the AHA statement regarding the 4.5 hour window?

CSA offered to contact CSA sites asking for feedback. The following is an anonymous summary of the responses received.

We are currently staying with the 3 hour window.

Presently, we are not utilizing the 4.5 hour time window as it is recognized as an "off label" use at this time. Some hospitals are waiting to hear back from their leadership team in regards as what to do.

Our hospital has moved to the 4.5 hour window, with the additional exclusions identified in the ASA recommendations for the 3 - 4.5 hour time frame. We are using a consent for the 3 - 4.5 hour window.

Our stroke clinical effectiveness team has developed a checklist for use by ED physicians to determine eligibility for tpa beyond the 3 hour window.

We are currently treating patients, who meet all other criteria, up to 4.5 hours. However, all our patient education efforts still encourage patients to present as quickly as possible and not to delay seeking medical attention simply because they may still be treated up to 4.5 hours. We are also stressing to providers, especially in the ED, that the 4.5 hour window should not be a reason to delay evaluation and treatment since earlier treatment is clearly better than later.

Our neurologists & ED physicians are going to stick with the 3 hour window for now. We still have yet to create a stroke rounding team, and to create a stroke alert team, and going outside of the current 3 hour window needs to be done by very stroke savvy, organized, up-to-date physicians. We are still educating our doctors and do not meet some guidelines as they stand currently (including TPA at 3 hours). Our ED docs are not convinced TPA is even a treatment and argue this point still.

We are considering treating patients with acute ischemic stroke with IV tPA who present to us with symptoms onset 4.5 hours ago - if they meet inclusion criteria that was applied in the ECASS 3 trial.