



## Montana Stroke Initiative Acute Stroke Transfer Checklist

*(to guide transfer prep, report, patient records for handoff)*

“This is a \_\_\_\_\_ from (facility). We are sending you a \_\_\_\_ year old male/female who presented to us at \_\_\_\_\_.”

<input type="checkbox"/> <b>Symptom timeline and ED presentation</b>
<input type="checkbox"/> Time last known well/stroke start <input type="checkbox"/> Presenting symptoms (BEFAST) <input type="checkbox"/> First NIHSS                      Large vessel occlusion signs Y N <input type="checkbox"/> First VS: HR/ Rhythm / BP/ RR/ T SpO2
<input type="checkbox"/> <b>Brain imaging</b>
<input type="checkbox"/> Non-contrast head CT                      Hemorrhage? Y N <input type="checkbox"/> CT angiogram head/neck                      Occlusion? Y N <input type="checkbox"/> Other: <input type="checkbox"/> Verify images uploaded to PACS/pushed to receiving hospital
<input type="checkbox"/> <b>Past medical surgical history</b>
<input type="checkbox"/> Relevant illnesses <input type="checkbox"/> Surgeries (recent)
<input type="checkbox"/> <b>Current home medications</b>
<input type="checkbox"/> <b>Care prior to transfer</b>
<input type="checkbox"/> Anticoagulant reversal <input type="checkbox"/> Supplemental O2: <input type="checkbox"/> BP management IVP drugs and drips <input type="checkbox"/> Alteplase total dose, bolus time, infusion start/stop time <input type="checkbox"/> TNK total dose, bolus time.



- IV sites:
- IV fluid totals and urine output
- Last VS and NIHSS:

## **Transfer considerations**

- Patients who received Alteplase or TNK must be transported to a facility with neurosurgical capability
- Patients who receive Alteplase or TNK must be transported by a level of provider who can
  - Conduct frequent neurologic assessments every 15 minutes
  - Vital signs every 15 minutes
  - BP management to maintain below 180/105mmHg.
- Orders must be in place for the transport team
  - BP control for post tPAs and hemorrhagic stroke
  - Management of complications of tPAs such as oral angioedema and sudden airway compromise.
  - Termination of the Alteplase infusion and normal saline follow up
- Patients with hemorrhagic stroke are at risk for deterioration during transport. The transport team must include providers with skills to provide and manage definitive airways.
- Name of transporting agency:
- PLEASE ASSURE FAMILY CONTACT IS IN TRANSFER RECORDS AND VERBALLY RELAYED IN HANDOFF REPORT**
  - Name / relationship**
  - Mobile number**
  - Your Call back number**