



Summary of Changes Report – February 2007

Diagnosis and Initial Treatment of Ischemic Stroke

Algorithm, Clinical Highlights, Annotations

Screening (Ambulatory) Algorithm – changed the time frame and assessment recommendations for patients with TIA symptoms.

ED Treatment Algorithm – added time frame and assessment recommendations for patients with TIA symptoms.

Ischemic Stroke ED Management (not a thrombolysis candidate) Algorithm) Deleted algorithm as redundant and it did not reflect best practice. Current best practice is to evaluate all patients to determine the role thrombolytic therapy may play in their treatment. The Stroke Code Algorithm includes management recommendations for patients who are determined not to be candidates for thrombolytic therapy.

Clinical Highlight) Added new highlight recommending that all patients who present with signs and symptoms of TIA should be evaluated for risk of immediate future events using the ABCD score.

13) Added two new references, one was Johnston, 2006 and the other was Goldstein 2006.

- * 20) New annotation for the necessary diagnostic evaluations and required time frame for patients with TIA symptoms.
- * 23) New annotation for the admission of patients with TIA symptoms at high risk for stroke.
- * 26) Added a suggested non-NIHSS neuro check assessment scheme.

Added a new sub-section highlighting evolving technology around diffusion and perfusion MRI studies as potential tools for extending the window for tPA administration.

31) Clarified the initial administration of aspirin therapy.

Priority Aims & Suggested Measures, Measurement Specifications

None

Support for Implementation

Key Implementation Recommendations) Added a new section on System Improvements that outlined a recent study that analyzed the potential yield of various system improvements in increasing the percentage of ischemic stroke patients receiving intravenous tPA and gave a prioritization schedule based on that analysis.

- * Added the tool from Park Nicollet Health Services on TIA Clinics.

**An asterisk indicates any changes in clinical practice recommendations*