Stroke, Suspected: ED

Associated Power Plans:
ED: EDP Stroke (Suspected); Inpt: Stroke (Suspected): PICU Stroke (Suspected)

Children's Mercy KANSAS CITY

Evidence Based Practice

Pediatric Pt with Suspected Stroke external to Children's Mercy Adele Hall (AH) campus:
- **Non-CMH institutions:**
  ‣ Call 1-800-GOMERCY
- **CM Offsite locations:**
  ‣ Call Transfer Center: 1-800-GOMERCY or x51529
  ‣ Identify you are caring for a "suspected stroke" patient
  ‣ Transfer to CM AH campus
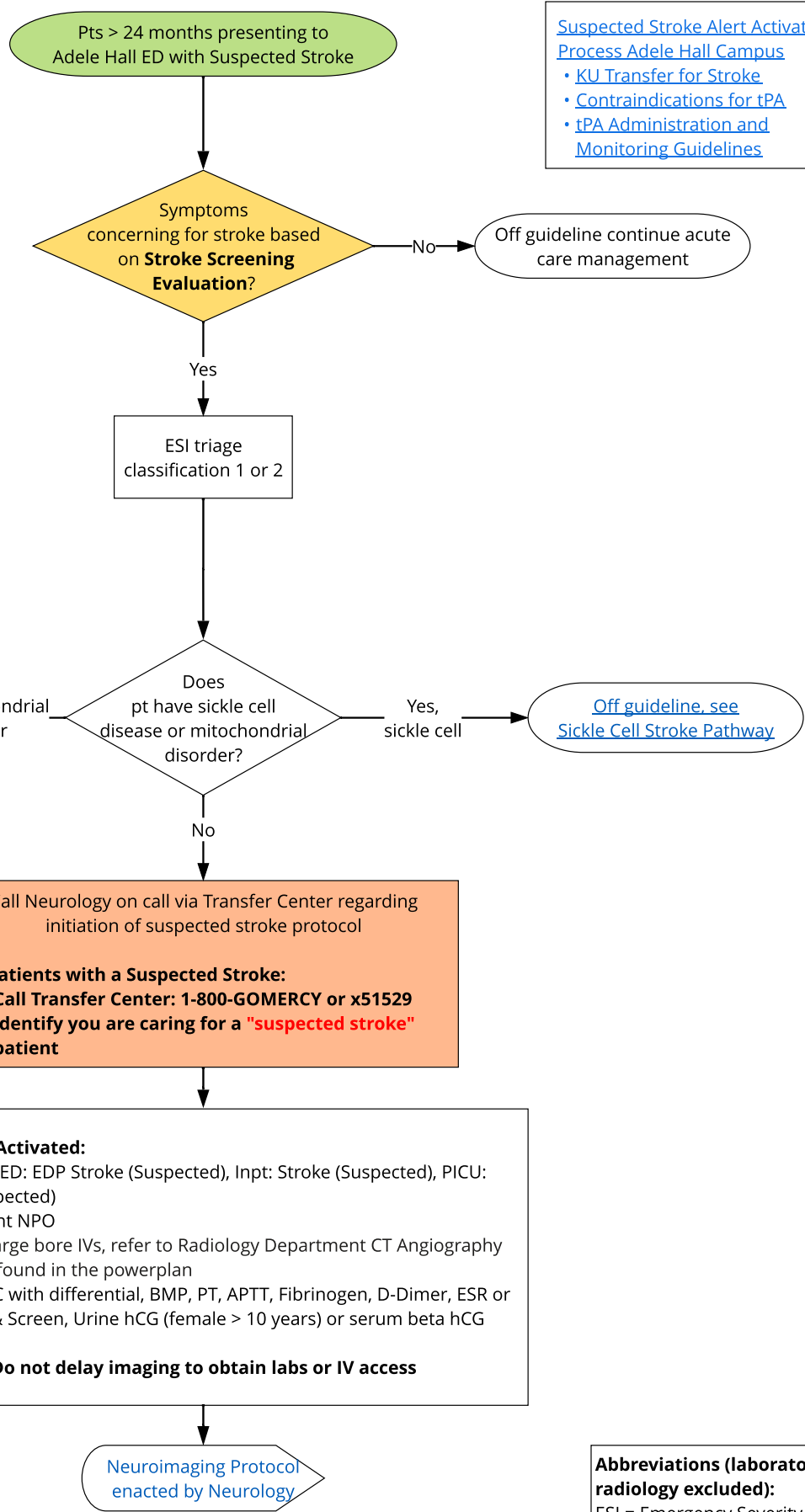
Stroke Screening Evaluation
I. Is there a focal neurological deficit?
   a. Unilateral weakness or sensory change
   b. Vision loss or double vision
   c. Speech difficulty
   d. Dizziness or trouble walking
II. Did the problem begin or get worse suddenly?
III. Has the problem been present for less than 24 hours?
   (When was the child last seen well?)

If **Yes to ALL three of the questions above**, *patient symptoms are concerning for stroke.*

Pts > 24 months presenting to Adele Hall ED with Suspected Stroke

Suspected Stroke Alert Activation Process Adele Hall Campus
- KU Transfer for Stroke
- Contraindications for tPA
- tPA Administration and Monitoring Guidelines

Symptoms concerning for stroke based on Stroke Screening Evaluation? → No → Off guideline continue acute care management

Yes ↓

ESI triage classification 1 or 2

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Does pt have sickle cell disease or mitochondrial disorder?
- Yes, mitochondrial disorder → Off guideline, page metabolic genetics
- Yes, sickle cell → Off guideline, see Sickle Cell Stroke Pathway

No ↓

Call Neurology on call via Transfer Center regarding initiation of suspected stroke protocol

For patients with a Suspected Stroke:
- **Call Transfer Center: 1-800-GOMERCY or x51529**
- **Identify you are caring for a "suspected stroke" patient**

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Stroke Alert Activated:
- Powerplan: ED: EDP Stroke (Suspected), Inpt: Stroke (Suspected), PICU: Stroke (Suspected)
- Make patient NPO
- Place two large bore IVs, refer to Radiology Department CT Angiography Guidelines found in the powerplan
- Obtain: CBC with differential, BMP, PT, APTT, Fibrinogen, D-Dimer, ESR or CRP, Type & Screen, Urine hCG (female > 10 years) or serum beta hCG

Do not delay imaging to obtain labs or IV access

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Neuroimaging Protocol enacted by Neurology

QR code for mobile view

Abbreviations (laboratory & radiology excluded):
ESI = Emergency Severity Index