**Montana Stroke Initiative**

**Acute Stroke Transfer and Hand Off Checklist**

“This is an \_\_\_ year old Male/female who presented to us at \_\_\_\_\_\_\_.”

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| **Symptom timeline and ED presentation** |
| [ ]  Time last known well/stroke start: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Presenting symptoms (BEFAST) [ ]  First NIHSS \_\_\_\_\_\_\_\_ Large vessel occlusion signs Y N[ ]  First VS: HR \_\_\_\_ Rhythm \_\_\_\_\_ BP \_\_\_\_\_ RR \_\_\_\_ T \_\_\_\_ [ ]  SpO2 \_\_\_\_\_\_ on \_\_\_\_\_ |
| **Brain imaging** |
| [ ]  Non-contrast head CT Hemorrhage? Y N[ ]  CT angiogram head/neck Occlusion? Y N[ ]  Other: [ ]  Verify images uploaded to PACS/pushed to receiving hospital  |
| **Past medical surgical history** |
| [ ]  Unk [ ]  List: [ ]  Surgeries or hospitalizations in the last 3 months:  |
| **Current home medications (List)** |
| Anticoagulants: Other:  |
| **Care prior to transfer** |
| Anticoagulant reversal: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supplemental O2: \_\_\_\_\_\_\_\_BP management: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Alteplase \_\_\_ mg 10% bolus at \_\_\_\_\_\_\_infusion started at \_\_\_\_\_\_\_\_\_ TNK\_\_\_\_mg bolused at: \_\_\_\_\_\_\_\_\_\_\_\_\_IV sites: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_IV fluid given\_\_\_\_\_\_\_\_\_\_\_\_cc Up at departure\_\_\_\_\_\_\_\_\_\_\_\_\_\_cc NS LRLast VS and NIHSS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Other: |
| **Transfer considerations** |
| [ ]  Patients who received Alteplase or TNK (tPAs)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 [ ]  Name of transporting agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  Report called to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  **FAMILY CONTACT:**[ ]  **Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_[ ]  **Mobile number** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**Transferring facility information:****Facility name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_****ED Provider: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print)****ED nurse calling report: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(print)****Call back number: (406) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |