

# What to do if you suspect INTRACRANIAL bleeding as a result of rt-PA.

## SUSPECT IF

<ul style="list-style-type: none"><li>• Neurological deterioration</li></ul>	<ul style="list-style-type: none"><li>• New headache</li></ul>
<ul style="list-style-type: none"><li>• Fall in conscious level</li></ul>	<ul style="list-style-type: none"><li>• Acute hypertension</li></ul>
<ul style="list-style-type: none"><li>• Seizure</li></ul>	<ul style="list-style-type: none"><li>• Nausea or vomiting</li></ul>

## STANDARD MANAGEMENT

1. Stop infusion of rt-PA
2. Arrange an urgent CT scan
3. Check fibrinogen, PT, APTT, full blood count and blood for "group and save"
4. Support circulation with iv fluids if needed
5. If intracranial bleeding confirmed, discuss with neurosurgeons
6. If no intracranial bleeding look for other causes of deterioration