tPA:
- Core treatment for acute ischemic stroke (lots of current controversy on this)
- Activates plasminogen to plasmin which breaks down fibrin
- Some studies showed: +12% improvement 3 months out AND +6% chance of devastating bleed

Know your tPA contraindications:
- 3 objective: glucose, blood pressure (>185/110), head CT
- 2 obvious: prior ICH or current ICH (SAH)
- A: Ask if history of aneurysm, AVMs, cancer, or other structural problems
- B: Current (or symptoms of) internal bleeding
- C: Any 3 month history of intracranial trauma, intracranial surgery, intracranial strokes
- D: Bleeding diasthesis – blood thinners/clotting disorders/coagulation labs
- E: Do you suspect endocarditis?

Relative contraindications: minor or resolving stroke, recent surgery or trauma, GI bleed, urinary bleed, seizure, recent LP, recent arterial puncture, pregnancy, or pericarditis after MI

3-4.5hr window addon list:
- A: age > 80,
- B: bad stroke NIH >25,
- C: CT shows multiple lobes,
- D: diasthesis/AC even if normal INR
- E: Ever had old stroke or diabetes?

HERE’S YOUR APP SUGGESTION: MDCalc!