

Change Notice

2020 Handbook of Emergency Cardiovascular Care for Healthcare Providers

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Print Page Number	Location	Original Text	Change	When Change Was Made
24	ACLS > under Inclusion and Exclusion Characteristics of Patients With Ischemic Stroke Who Could Be Treated With Alteplase Within 3 Hours After Symptom Onset and Extended Window for Select Patient From 3 to 4.5 Hours > end of table, before the Abbreviations list		{The table Alteplase Considerations in the 3- to 4.5-Hour Time Window in Addition to Those in the 0- to 3-Hour Window was inserted before the Abbreviations list (see attached PDF).}	At next printing or update after 10/7/2020
39	ACLS > ACLS Drugs > top half of page > gray header over 3rd column	Pediatric Dosage	Adult Dosage	At next printing or update after 10/7/2020
67	ACLS > Neuromuscular Blocking Agents, Abbreviations list under table	IV, intravascular	IV, intravenous	At next printing or update after 9/29/2020
72	Neonatal > Newborn Resuscitation > Apgar Score table		{A footnote was added to the table: “Note on assessing color: Evaluating the color of a newly born infant, especially one who is transitioning after birth, is difficult and often subjective. One method is to look for pink color around the mouth, palms, and soles.”}	At next printing or update after 9/29/2020

Print Page Number	Location	Original Text	Change	When Change Was Made
74	Neonatal > Newborn Resuscitation Ratios, Equipment, and Drugs > Medications Used During or After Resuscitation of the Newborn, Abbreviations list under table	IV, intravascular	IV, intravenous	At next printing or update after 10/23/2020
86	PALS > Neuromuscular Blocking Agents, Abbreviations list under table	IV, intravascular	IV, intravenous	At next printing or update after 9/29/2020

Alteplase Considerations in the 3- to 4.5-Hour Time Window in Addition to Those in the 0- to 3-Hour Window*

Indications (COR 1)	
3-4.5 hours†	IV alteplase (0.9 mg/kg, maximum dose 90 mg over 60 min with initial 10% of dose given as bolus over 1 min) is also recommended for selected patients who can be treated within 3 and 4.5 hours of ischemic stroke symptom onset or patient last known well. Physicians should review the criteria outlined in this table to determine patient eligibility.‡ (COR 1; LOE B-R)¶
3-4.5 hours—Age	IV alteplase treatment in the 3- to 4.5-hour time window is recommended for those patients ≤80 years of age, without a history of both diabetes mellitus and prior stroke, NIHSS score ≤25, not taking any OACs, and without imaging evidence of ischemic injury involving more than one third of the MCA territory.‡ (COR 1; LOE B-R)¶
Additional recommendations for treatment with IV alteplase for patients with AIS (COR 2a)	And (COR 2b)
3-4.5 hours—Age	For patients >80 years of age presenting in the 3- to 4.5-hour window, IV alteplase is safe and can be as effective as in younger patients.‡ (COR 2a; LOE B-NR)¶
3-4.5 hours—Diabetes mellitus and prior stroke	In AIS patients with prior stroke and diabetes mellitus presenting in the 3- to 4.5- hour window, IV alteplase may be as effective as treatment in the 0- to 3-hour window and may be a reasonable option.‡ (COR 2b; LOE B-NR)¶
3-4.5 hours—Severe stroke	The benefit of IV alteplase between 3 and 4.5 hours from symptom onset for patients with very severe stroke symptoms (NIHSS score >25) is uncertain.‡ (COR 2b; LOE C-LD)¶
3-4.5 hours—Mild disabling stroke	For otherwise eligible patients with mild disabling stroke, IV alteplase may be reasonable for patients who can be treated within 3 and 4.5 hours of ischemic stroke symptom onset or patient last known well or at baseline state. (COR 2b; LOE B-NR)§