Tenecteplase for STROKE

- x Final check with TeleStroke provider on screen
 - (3 checksin 30 second) = Time OUT prior to dose being given
 - 1. Right Patient
 - 2. Right Medication
 - 3. Right Dose
- x MAX dose of Tenecteplase is 25 (fagnL of reconstituted solution)

x Tenecteplase can precipitate if giving in an IV line with dextrose x It is recommended to flush before and after dose with NS

Jinnes Stroke		rofficial States Alienias		sy witter		
SILVAF-		ALLEINIGS		<u>waningkan ta NAT</u>	. arana antiki a anitta	Windowstware a
BD representa	ະສານອາທຸລູ (ant daning memory and			a	400/405-180/105
u_ _	Woig	ht Panga has	od doeing			
indiada indiad	-5 -5				m. Tablellas – recency	(
	4	smg (sml)	90	mg (9 <mark>ml bolus</mark>)	Maxim	ium dose
		5ma/mL		1ma/ml	Conce	otration_
		∠U-	25'mn		5 min	Hamme
mix/deliver?		Per S	ite Policy	Rer.	Site Roliçv	Pharmacy
Viexee		Timoout/due	laian eff?y		V/	
-needle		30 min or less		30 min or less		Goal door-to
·					<u> </u>	

Tenecteplase for STROKE

Tenecteplase Reconstitution:

- 1. Use 10 mL syringe with blunt fill needle (supplin kit) to windraw 10 mL Sterile water
- 2. Inject 10 mL sterile water into the Tenecteplase vial
- 3. Gently swirl the vial (DO NOT SHAKE)
- 4. Inspect vial for clarity and absence of particulate matter
- 5. Calculate dose according to patients' actual weight using the weight dosing table. (Doseshould be ari bnaIE-5-3.5 (e)-2.2 0 Tc 0 Tw 15 0 Td 3.3.U (a).6 (e)-2.2 (a)-21..4 (