



Emergency Specialist Program: STEMI Thrombolytic Exclusion Checklist

Yes	No	ABSOLUTE EXCLUSION CRITERIA
		Active internal bleeding
		History of cerebrovascular accident: Ischemic CVA within 3 months or any history of ICH
		Suspected aortic dissection
		Intracranial or intraspinal surgery or trauma within 2 months
		Intracranial neoplasm, arteriovenous malformation, or aneurysm
		Known bleeding diathesis
		Severe uncontrolled hypertension > 180/110 despite IV medication
Yes	No	RELATIVE CONTRAINDICATIONS
		Recent major surgery, e.g., coronary artery bypass graft, obstetrical delivery, organ biopsy, previous puncture of noncompressible vessels within 2-4 weeks
		Cerebrovascular disease
		Recent gastrointestinal or genitourinary bleeding
		Recent significant trauma
		Hypertension: systolic BP greater than 180 mmHg and/or diastolic BP greater than 110 mmHg
		High likelihood of left heart thrombus, e.g., mitral stenosis with atrial fibrillation
		Acute pericarditis
		Subacute bacterial endocarditis
		Hemostatic defect, including those secondary to severe hepatic or renal disease
		Severe hepatic dysfunction
		Pregnancy
		Diabetic hemorrhagic retinopathy or other hemorrhagic ophthalmic conditions
		Septic thrombophlebitis or occluded AV cannula at seriously infected site
		Advanced age ≥ 75
		Patients currently receiving oral anticoagulants, e.g., warfarin sodium with INR ≥ 1.7
		Recent administration of GP IIb/IIIa inhibitors
		Another condition in which bleeding constitutes a significant hazard or would be particularly difficult to manage because of its location.
Yes	No	INCLUSION CRITERIA
		Patient with ST elevation myocardial infarct experiencing chest discomfort greater than 15 minutes and less than 12 hours.

• If the patient has severe heart failure or cardiogenic shock, then PCI is preferred.

Additional considerations may apply, and these are guidelines to be used at the discretion of the attending physician.

Completed by _____

Date / Time _____

Completed by _____

Date / Time _____