## Laboratory testing—Rationale and Tips for Reducing Door-to-Needle Times Without Compromising Patient Safety

Venous ood samp ng wt STAT assessment of crt ca a oratory values is a required part of the assessment for tPA. Provision of tPA would be unsafe in the setting of a known coagulopathy. AHA/ASA guide nest and the FDA package are ng a recommend against the use of tPA when there is a known coagulopathy, the patient is taking warfar nit and the INR is greater than 1.7, the PTT is elevated, or plate ets are essitian 100,000. All reflocused is story should be on tained to assess for the presence of medical conditions associated with coagulation disorders, including the presence of cancer, alcolors, renail or inverse faure or drug and use. However, the most common yield entered coagulopathy is due to the use of warfar nor other anticoagulants.

Watng for the return of a loratory values, especially INR and PTT, can need essly deay the initiation of tPA in patients with a most noinsk of coagulopathy. Please consider these tips to avoid a loratory deays to improve your patient's door-to-need eithmes:



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## TIME LOST IS BRAIN LOST.™