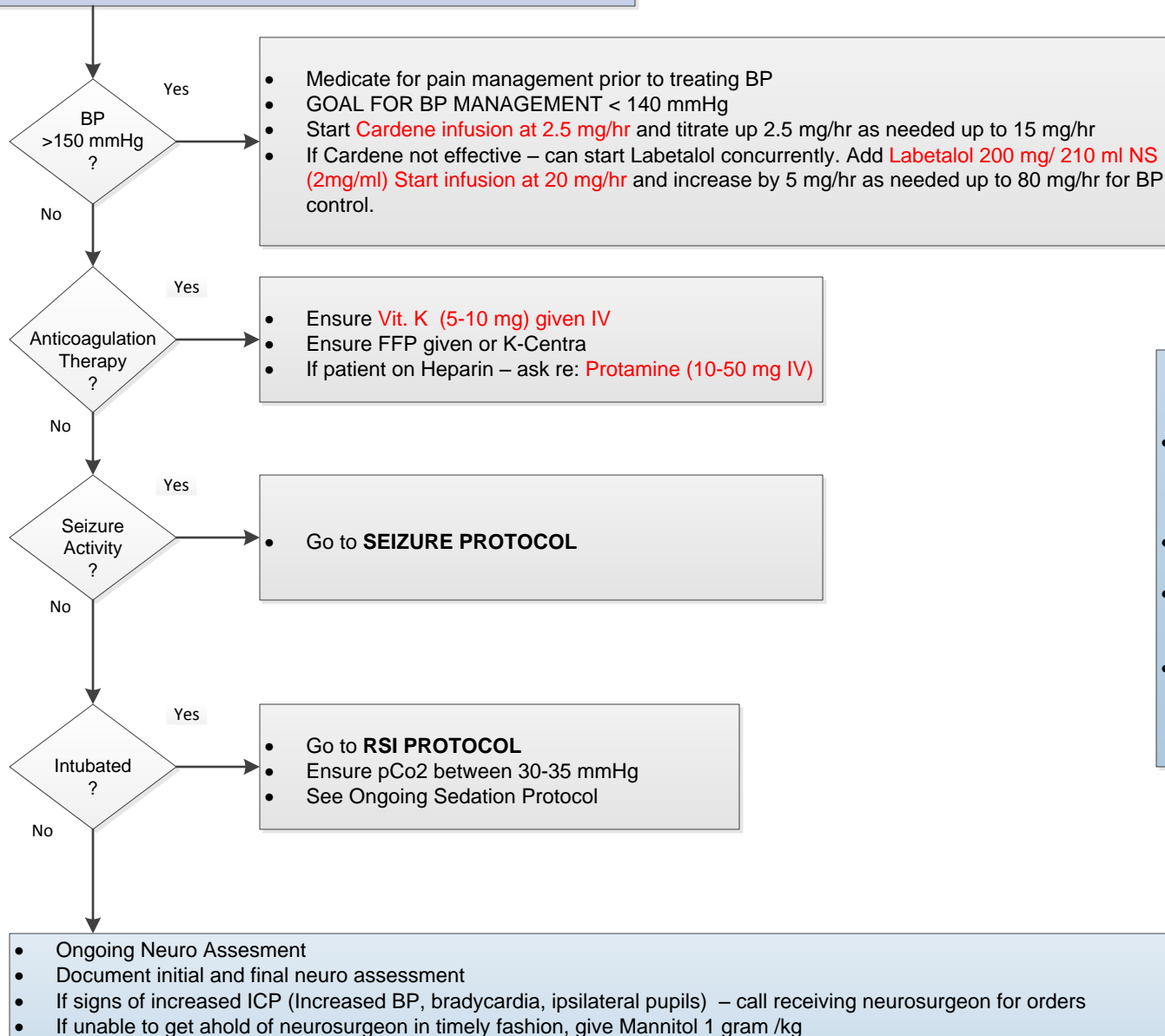


# SPONTANEOUS INTRACEREBRAL HEMORRHAGE (ICH)

- Have two IV's (if running medication infusions)
- HOB elevated at least 30 degrees
- Keep O2 sat >94%
- CT confirmed ICH
- Assess airway control and management
- Ask about prior anticoagulation therapy, check INR & platelets



## KEY POINTS

- Call Sending facility to find out if underlying anticoagulant therapy contributing to bleeding. Then can ask to start with reversal therapy.
- Plavix or Brilinta – consider platelet infusion
- Xarelto or Rivoroxaban or other factor 10 inhibitors – K-Centra (preferred) or FFP and Vit K.
- If the patient is on Nipride and the BP is very labile, start Cardene and titrate Nipride off and increase Cardene as directed.