For Acute Ischemic Stroke

Activase® (alteplase) Dosing and Administration

**Dosing**

The recommended dose of Activase is 0.9 mg/kg (not to exceed 60 mg) total dose infused intravenously over 60 minutes with 10% of the total dose administered as an initial bolus over 1 minute.

For information on reconstitution of 50- and 100-mg vials of Activase, see full Prescribing Information.

**Administration**

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**Adverse Reactions**

Coagulation Tests May be Unusual during Activase Therapy. Coagulation tests and/or measurement of fibrinolytic activity may be unreliable during Activase therapy.

**Adverse Effects**

The most frequent adverse reaction associated with Activase therapy is bleeding.

Please see the accompanying full Prescribing Information for additional important Safety Information.

**Weight (kg)** | **Dose** | **Required Quantity** | **Dose** | **Weight (lb)**
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<tr>
<td>90</td>
<td>40.9</td>
<td>38.8</td>
<td>62.2</td>
<td>92</td>
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Dosing

The recommended dose of Activase is 0.9 mg/kg (not to exceed 90 mg total dose) infused intravenously over 60 minutes with at least 10% of the total dose administered as an initial bolus over 1 minute.

For information on reconstitution of 50- and 100-mg vials of Activase, see full Prescribing Information.

Administration

Step 1 INSPECT SOLUTION

After reconstitution to 1 mg/mL, inspect the solution for particulate matter and discoloration prior to administration. The reconstituted preparation results in a colorless to pale yellow transparent solution.

Step 2 DISCARD EXCESS

DO NOT prime the syringe.

Step 3 PREPARE BOLUS

DO NOT prime the syringe.

Step 4 PREPARE INFUSION SET

Insert the spike end of an infusion set through the center of the stopper of the vial of reconstituted Activase, using the same puncture site made by the transfer device.

Step 5 PRIME INFUSION SET

Prime infusion set tubing with Activase solution.

Step 6 ADMINISTER BOLUS

Administer IV bolus over 1 minute. Administer IV bolus directly through the IV port or program the infusion pump to deliver the bolus dose.

Step 7 ADMINISTER REMAINDER

Immediately following the bolus dose, infuse the remaining 90% of the 0.9-mg/kg dose over 60 minutes.

Step 8 FLUSH IV TUBING

To ensure the full dose is delivered:

• Spike a small bag (eg, 50 mL) of 0.9% Sodium Chloride, USP, with end of the Activase infusion set when the Activase vial is empty. The infusion should continue at the same rate.

No medication should be added to infusion solutions that contain Activase. For additional information regarding dosing and administration, please see the Activase full Prescribing Information.

Indication

Activase is indicated for the treatment of acute ischemic stroke. Excludes intracranial hemorrhage or the primary cause of stroke signs and symptoms prior to initiation of treatment. Initiate treatment as soon as possible but within 3 hours after symptom onset.

Important Select Safety Information

Contraindications

Do not administer Activase to treat acute ischemic stroke in the following situations in which the risk of bleeding is greater than the potential benefit: current intracranial hemorrhage (ICH), subarachnoid hemorrhage, active internal bleeding; recent (within 3 months) intracranial or intrapulmonary surgery or serious head trauma; presence of intracranial conditions that may increase the risk of bleeding; bleeding diathesis; and current severe uncontrolled hypertension.

Warnings and Precautions

Bleeding

Activase can cause significant, sometimes fatal, internal or external bleeding, especially at arterial and venous puncture sites. Avoid intramuscular injections and trauma to the patient. Fatal cases of hemorrhage associated with traumatic intubation in patients administered Activase have been reported. Hemarthrosis, asper, or Activase may cause bleeding complications; therefore carefully monitor for bleeding. If serious bleeding occurs, terminate the Activase infusion.

Oral/NG Angioedema

Monitor patients during and for several hours after infusion for oral or pharyngeal angioedema. If angioedema develops, discontinue the Activase infusion and promptly institute appropriate therapy.

Cholesterol Embolization

Cholesterol embolism, sometimes fatal, has been reported rarely in patients treated with thrombolytic agents.

Coagulation Tests May be Unreliable during Activase Therapy

Coagulation tests and/or measures of fibrinolytic activity may be unreliable during Activase therapy.

Adverse Reactions

The most frequent adverse reaction associated with Activase 4.5 mg/kg therapy is bleeding.

Allergic-type reactions, e.g., anaphylactoid reaction, laryngeal edema, orolingual angioedema, rash, and urticaria have been reported.

References: