# Module 2

# THROMBOLYTIC THERAPY IN ACUTE ISCHEMIC STROKE

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Reviewed by Teresa A. Allison, Pharm.D., BCPS; and Chigozie Mason, Pharm.D., BCPS

### **LEARNING OBJECTIVES**

- 1. Analyze the evidence involving the use of fibrinolytics in acute ischemic stroke (AIS).
- 2. Evaluate a patient's eligibility for receiving thrombolytic therapy in AIS.
- 3. Design an individualized treatment plan for the use of intravenous and intra-arterial thrombolytic therapy in a patient with AIS.
- 4. On the basis of the best-quality evidence, identify the eligible population and recommend a thrombolytic dose for a patient who may receive intra-arterial thrombolysis.
- 5. Develop a plan for monitoring and post-thrombolysis care, including blood pressure control, thromboembolic prophylaxis, and antiplatelet therapy, for a patient receiving thrombolytic therapy.
- 6. Justify the importance of obtaining certification as a complete stroke center.

# THROMBOTIC AND BLEEDING DIATHESES IN CRITICALLY ILL PATIENTS

BY WESLEY D. MCMILLIAN, PHARM.D., BCPS; AND JOSEPH ALOI, PHARM.D., BCPS

Reviewed by Joseph E. Mazur, Pharm.D., BCPS; and Katy H. Wright, Pharm.D., BCPS

### **LEARNING OBJECTIVES**

- 1. Evaluate novel pharmacologic agents for the treatment of venous thromboembolism (VTE).
- 2. Design a patient-specific plan for the treatment of a submassive or massive pulmonary embolism in patients with moderate bleed risk.
- 3. Apply recent guideline recommendations to develop an appropriate anticoagulant regimen for patients requiring acute treatment of VTE.
- 4. Demonstrate an understanding of the pharmacology and laboratory monitoring for the novel oral antithrombotic therapies.

- 5. Devise a strategy for the periprocedural management of patients taking one of the novel oral anticoagulants.
- 6. Develop a treatment plan for the reversal of novel oral systemic anticoagulants in patients requiring an emergency surgical procedure.

## **INFECTION IN CRITICALLY ILL PATIENTS**

# BY LISA HALL ZIMMERMAN, PHARM.D., BCPS, BCNSP, FCCM; AND JANIE FARIS, PHARM.D., BCPS

Reviewed by Dustin D. Spencer, Pharm.D., BCPS: and Edward Edmond Grace, Pharm.D., BCPS (AQID), AAHIVP

### **LEARNING OBJECTIVES**

- 1. Evaluate the critically ill patient with fever for the presence of specific infections.
- 2. Identify pathogens associated with ICU infections to design a therapeutic plan to optimize treatment.
- 3. Evaluate rapid diagnostic testing strategies in the management of critically ill patients with infections.
- 4. Develop strategies to prevent infections in the ICU.

# PAIN, AGITATION, AND DELIRIUM IN THE ICU

## BY KARA L. BIRRER, PHARM.D., BCPS

Reviewed by Jeffrey J. Fong, Pharm.D., BCPS; and Eimer Maldonado, Pharm.D., BCPS

#### **LEARNING OBJECTIVES**

- 1. Apply knowledge of the clinical presentation and associated risk factors to identify the development of pain, agitation, and delirium in a patient in the intensive care unit (ICU).
- Evaluate a patient's depth of sedation, analgesia, and delirium using the appropriate bedside assessment scales.
- Design a treatment plan to manage pain or agitation during invasive or potentially painful ICU
  procedures using the 2013 Clinical Practice Guidelines for the Management of Pain, Agitation, and
  Delirium.
- 4. Formulate and implement a sedation/analgesia protocol or guideline to a target a light depth of sedation in an ICU patient.
- 5. Justify the use of delirium screening tools to facilitate early identification of delirium in the ICU.