

UWMC ED – BP Recommendations for Acute Stroke:

Hemorrhagic Stroke → IPH

- IPH: Goal SBP < 160 mm Hg.
- SBP 180-230 mmHg or DBP 105-120 mmHg, repeat BP in 5-10 minutes. If BP remains in that range, give:
 - Labetalol 10 mg IV over 1-2 minutes (hold for HR < 55).
 - May repeat Labetalol every 15 minutes until effective, sequentially increasing each dose as follows: 20 mg, then 40 mg, then 60 mg (maximum bolus dose), up to a total does of 300 mg (hold for HR < 55).
 - Monitor BP every 10 minutes until BP goal in range x 30 minutes without further treatment.
- SBP > 230 mmHg or DBP > 120 mmHg, give:
 - Labetalol 20 mg IV over 2 minutes (hold for HR < 55).
 - May repeat Labetalol every 15 minutes until effective, sequentially increasing each dose as follows: 40 mg, then 60 mg (maximum bolus dose), up to total dose of 300 mg (hold for HR < 55).
 - If satisfactory response not attained, start:
 - Nicardipine infusion at 5 mg/hr, titrate by 2.5 mg/hr at 15 minute intervals to a maximum of 15 mg/hr.

Hemorrhagic Stroke → SAH

- SAH: Goal SBP < 120 mm Hg.
- SBP > 140 mmHg, repeat BP in 5-10 minutes. If BP remains in that elevated, give:
 - Labetalol 10 mg IV over 1-2 minutes (hold for HR < 55).
 - May repeat Labetalol every 15 minutes until effective, sequentially increasing each dose as follows: 20 mg, then 40 mg, then 60 mg (maximum bolus dose), up to a total does of 300 mg (hold for HR < 55).
 - Monitor BP every 10 minutes until BP goal in range x 30 minutes without further treatment.
 - If satisfactory response not attained or requiring ≥ 3 doses of medication to reach goal, start:
 - Nicardipine infusion at 5 mg/hr, titrate by 2.5 mg/hr at 15 minute intervals to a maximum of 15 mg/hr.