CRITICAL REVIEW FORM: THERAPY I

Citation:

<table>
<thead>
<tr>
<th>Guide</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>I</strong></td>
<td>Are the results valid</td>
</tr>
<tr>
<td><strong>A</strong></td>
<td>Did experimental and control groups begin the study with a similar prognosis?</td>
</tr>
<tr>
<td>1</td>
<td>Were patients randomized?</td>
</tr>
<tr>
<td>2</td>
<td>Was randomization concealed?</td>
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<tr>
<td>3</td>
<td>Were patients analyzed in the groups to which they were randomized?</td>
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<tr>
<td>4</td>
<td>Were patients in the treatment and control groups similar with respect to known prognostic factors?</td>
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<tr>
<td><strong>B</strong></td>
<td>Did experimental and control groups retain a similar prognosis after the study started?</td>
</tr>
<tr>
<td>1</td>
<td>Were 5 important groups(patients, caregivers, collectors of outcome data, adjudicators of outcome, data analysts) aware of group allocation?</td>
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<tr>
<td>2</td>
<td>Aside from the experimental intervention, were groups treated equally?</td>
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<tr>
<td>3</td>
<td>Was follow-up complete?</td>
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</table>
## What are the results?

1. How large was the treatment effect?

2. How precise was the treatment effect?

## How can I apply the results to my patient care?

1. Were the study patients similar to my patient?

2. Were all patient-important outcomes considered?

3. Are the likely benefits worth the potential harms and costs?

### ECASS III Exclusion Criteria

- Age < 18 or > 80 years
- Onset of stroke > 4.5 hours before drug administration or symptom onset unknown
- Stroke symptoms present < 30 minutes or significantly improving before treatment
- Intracranial hemorrhage
- Severe stroke as defined by NIHSS > 25 or imaging (CT or MRI) displaying > 1/3 of middle cerebral artery territory involved
- Seizure at the onset of stroke
- Stroke or serious head trauma within the previous 3-months
- Combination of previous stroke and diabetes mellitus
- Heparin within the preceding 48 hours with PTT above normal limit
- Platelet count < 100,000 mm$^3$
- Systolic blood pressure > 185 mm Hg or diastolic > 110 mm Hg or aggressive treatment (intravenous medication) to reduce blood pressure to these limits
- Glucose < 50 mg/dL or > 400 mg/dL
- Symptoms suggestive of subarachnoid hemorrhage even if CT normal
- Oral anticoagulation therapy
- Major surgery or severe trauma within 3-months
- Other major disorders with an increased risk of bleeding