**Stroke Patient Scanning Process (Emergent/Non-Urgent)**

**Steps for when a stroke is paged in ER**

1. Technologist should go immediately to ER if not already there.
2. If patient is on table, finish exam.
3. If patient is in room and not yet on table, return to ER room.
4. Notify stroke patient RN that they can bring patient to CT room (if patient is ER)
5. Set up room including loading injector, printing order, and entering contrast.
6. RN should bring patient and assist with getting patient on table.
7. Call radiologist immediately after scanning non-contrast head. Please document which radiologist and time on paperwork.
8. Complete exam and get patient up. RN should be there to return patient to ER.
9. Confirm that iRapid images are on PACs.
10. Complete post processing when time allows.
11. If any delays happen, please document on paperwork **including times.**
12. Please add technologist name to paperwork.

**Steps for when a CTA head/neck w or wo perfusion is ordered but not paged.**

1. If CTA head/neck w or wo perfusion is order without being paged, call ordering physician to confirm that patient is NOT an emergent stroke. Please document which physician and time on paperwork.
2. Wait for creatine and iv placement prior to doing study.
3. Set up room including loading injector, printing order, and entering contrast.
4. Patient can come to CT w/o nurse.
5. Set up room including loading injector, printing order, and entering contrast.
6. Call radiologist immediately after scanning non-contrast head. Please document which radiologist and time on paperwork. Let them know exam was not paged as an emergent stroke.
7. Confirm that iRapid images are on PACs.
8. Complete post processing when time allows.
9. If any delays happen, please document on paperwork **including times.**
10. Please add technologist name to paperwork.