Recent clinical trials confirm that rapid restoration of blood flow to eligible patients with acute ischemic stroke is highly effective in reducing long-term morbidity.

- Alteplase IV r-tPA within 4.5 hours of stroke onset reverses the residual care for most ischemic stroke patients, providing the opportunity for more favorable outcomes.
- Concomitant with Alteplase IV r-tPA, early mechanical thrombectomy using stent retrievers within 6 hours of stroke onset may lead to faster and more complete reperfusion.

Regional systems of early stroke care should be developed that coordinate first-contact services with local and regional hospitals to achieve minimum delay time from symptom onset to definitive treatment.

- Time from symptom onset to intravenous Alteplase IV r-tPA should be less than 3 hours and never more than 4.5 hours.
- Time from first symptoms to endovascular therapy should be less than 6 hours.
- To achieve expedited care, public awareness of the signs of stroke and need to call 9-1-1 immediately by the community is needed.1

**Key takeaways:**
Recent clinical trials confirm that rapid restoration of blood flow to eligible patients with acute ischemic stroke is highly effective in reducing long-term morbidity.

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The path to achieve these goals is represented in the flowchart on the next page.

**References:**