

Intracerebral Hemorrhage

Early stabilization and reversal

Neurology

PHYSICIAN REFERENCE

Immediate

- Airway if needed, urgent CT, BP management using protocolized target, neurosurgical/stroke consultation.

Reverse

- Rapidly reverse anticoagulation when relevant using agent-specific strategy.

Monitor

- Expansion, hydrocephalus, ICP, seizures when clinically present, and need for surgical intervention.

Clinical safety note

Use this as a memory aid, not a prescription. Verify current guidelines, local protocols, contraindications, renal/hepatic dosing, pregnancy status, interactions and patient-specific factors before treatment.