

**Supplementary Table 1.** Indications for intravenous thrombolysis (as recommended by the Korean Stroke Society)

1.	The patient must have ischemic stroke with neurological deficits that are not minor.
2.	Neurological deficits should not improve rapidly on their own.
3.	Patients with severe neurological deficits should be treated with caution.
4.	Symptoms must not be caused by subarachnoid hemorrhage.
5.	No history of head trauma or stroke within the past 3 months.
6.	No history of myocardial infarction within the past 3 months.
7.	No gastrointestinal or genitourinary bleeding within the past 21 days.
8.	No major surgery performed within the past 14 days.
9.	No arterial puncture at a non-compressible site within the past 7 days.
10.	No history of intracranial hemorrhage.
11.	Blood pressure must be controlled within a systolic pressure of $\leq 185$ mm Hg and diastolic pressure of $\leq 110$ mm Hg.
12.	No evidence of bleeding or trauma (including fractures) upon physical examination.
13.	If taking oral anticoagulants, the INR must be $\leq 1.7$ .
14.	If heparin was administered within the past 48 hours, aPTT must be within the normal range.
15.	Platelet count must be $\geq 100,000/\text{mm}^3$ .
16.	Blood glucose levels must be $\geq 50$ mg/dl (2.7 mmol/L).
17.	Neurological deficits must not be due to a seizure.
18.	CT imaging must not show multilobar infarction or hypodense lesions involving more than one-third of the cerebral hemisphere.
19.	The patient or their caregiver must understand the risks and benefits of the treatment.

INR: international normalized ratio; aPTT: activated partial thromboplastin time; CT: computed tomography.