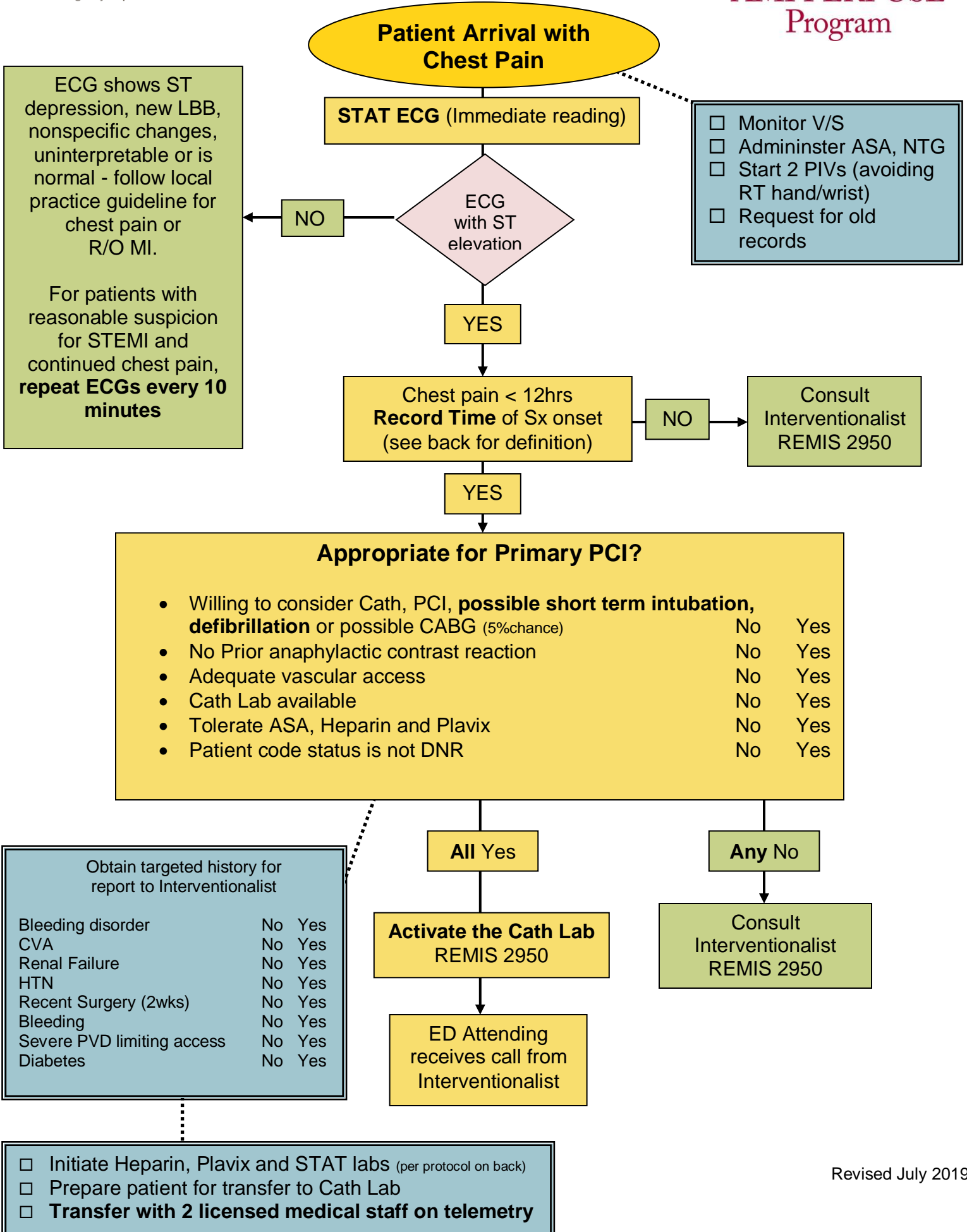


STEMI PATHWAY



Patients Emergently Reperused by Facilities United for STEMI Excellence

Symptom Onset Definition

- For patients reporting symptoms initially intermittent and subsequently constant, the onset time is defined as the time of change from intermittent to constant symptoms.
 - Patients reporting symptoms that were initially mild and subsequently changed to severe, the onset time is defined as the time of change in symptom severity.
 - For patients with both, the change in symptom severity is given preeminence in determining symptom onset time.
- ~AHA/ACC definition

PHYSICIAN ORDER GUIDELINES FOR THE STEMI PATIENT

Ancillary

- ECG 12-Lead STAT, every 10 min with continuing CP
- RN pulse oximetry; administer supplemental oxygen to obtain saturation above 92%

Laboratory

- CBC STAT
- CMP STAT
- Troponin T STAT
- PTT STAT
- PRO Time STAT

IV Fluids – Avoid IVs in Right Hand or Wrist!

- Periph Line #1. Start 0.9% N/S 1000 ml @100 ml/hr until D/C. **Use 32” extension set**
- Periph Line #1 Start Nitroglycerin concentration B, (400 mcg/ml D5W)(100mg/250ml)
Titrate to SBP 90 and pain, Cont. until D/C

Medications

- Aspirin 324mg STAT
- Heparin Inj 60 u/kg IV push Now (maximum dose 4000u)
- Plavix 600 mg PO Now
- Consider BB/nitrates for hypertensive patients

Physician to Nurse

- Record estimated height, weight, and allergies

Prepare Patient for Transfer to Cath Lab

- Patient on stretcher and ready
- No clothing, plastic snap gown, prep groin (time permitting)
- Portable monitor and O2

Important occurrences to document and time benchmarks

1. ED Arrival
2. Mode Patient arrived in ED (PV, EMS w/ECG, EMS w/o ECG)
3. 1st ECG time, subsequent ECG times, ECG time when STEMI is diagnosed
4. Any delays that occur in ED – Pt refusal, cardiac arrest, intubation, Cath Lab not available, etc.
5. Time patient departs the ED

Time goals – Time is Muscle!

- ED arrival to ECG within 10 minutes
- Door to Balloon within 60 minutes