STEMI PATIENTS GUIDELINES for MANAGEMENT

PURPOSE:
To facilitate the rapid and efficient treatment of patients experiencing an ST Elevation Myocardial Infarction (STEMI) with Percutaneous Coronary Intervention (PCI).

BACKGROUND:
LSUHSC-Shreveport has declared itself as a primary PCI facility in the treatment of patients experiencing a STEMI. To that end, LSUHSC will not divert STEMI patients away except under extreme circumstances when the patient’s best interest would not be served by accepting them (i.e. Cath Lab non-functional or other cath resources not readily available)

GUIDELINES:
1. **All patients (over the age of 30) presenting** to the Emergency Department with the complaint of “Chest Pain” should have an **EKG performed within ten (10) minutes of presentation**.

2. Immediately upon review of an EKG consistent with a STEMI (whether from triage or transmitted by EMS from the field) the ED Attending will activate the Cath Team by calling the LSU Operator and requesting a “911 CATH TEAM ACTIVATION”. The Cath Team will recognize this as a potential STEMI case and report to the hospital immediately. The House Supervisor or Hospital Administrator On-Call will also be paged by the Operator to respond and assist with placement of the patient after PCI.

3. If the patient has not completed the patient registration process a “STAT PACK” number will be activated for the patient so there is no delay while registering the patient.

4. If the Cath Lab is ready and staffed, the patient will be transferred directly there without stopping in the ED. If the Cath Lab is not prepared to receive the patient on their arrival, the patient will stop in the ED Shock Resuscitation Unit (SRU/Code Room) for assessment and STEMI drug administration (see pre-printed order set attached). Any unstable patient (defined as hypotensive, in need of airway management, or physician discretion) will stop in the ED for stabilization prior to transport to the cath lab.

5. Upon arrival of one (1) Cath Team Nurse/Tech and room preparation, the Nurse/Tech will call for the patient from the ED. The patient will be transferred to the Cath Lab accompanied by at least one (1) ED Nurse and the Cardiology Fellow. The ED Nurse will remain with the patient to assist the Cath Team until all of the Cath Team members have arrived and assumed care of the patient.

6. The House Supervisor and/or Hospital Administrator On-call will assist cardiology with the admission process for the post-PCI patient. They will determine the most appropriate location for the post-PCI patient based on the resources available at that time and consultation with appropriate physicians. Options include appropriate ICU placement, post-op recovery, remaining in the cath lab, or rarely, return to the ED.
7. In the event that the Cath Lab is at full capacity and in the opinion of the Cardiology Staff another STEMI patient could not be safely managed during that period of time, the cath lab coordinator will place LSUHSC-S on temporary PCI diversion status on the EMSSystem website until that situation has resolved.
Potential STEMI identified from Triage EKG or by EMS field EKG transmission

ED Attending Notified

ED Attending confirms case and initiates “911 CATH TEAM ACTIVATION” by contacting the Hospital Operator

CATH TEAM ACTIVATION

ECC ATTENDING
- Notifies Cardiology Fellow
- Notifies Charge Nurse of STEMI STAT
- Initiates Treatment/Stabilization of Patient until Cardiology Arrives
- Cardiology Fellow meets patient in ECC
- Continues stabilization until Cath Team ready
- Cardiology Fellow will discuss with House Manager/Administration the need for temporary STEMI Diversion while PCI resources are being utilized. (5-5060 or pager 1614)

ECC NURSING
- Activates STAT Registration Number
- Initiates PCI Pack/Triage Nurses Assessment
- Initiates orders/prepares patient for transport to Cath Lab
- Accompanies STEMI patient to Cath Lab immediately upon arrival of first CATH TEAM member

CATH TEAM
- Receives 911 Activation page and proceeds immediately to Cath Lab
- RN’s arrive to Cath Lab/Prepares room
- Notifies ECC Nurse upon arrival (Charge Nurse Phone 3-3350) Code Room Phone 5-6873
- Procedure complete, discuss arrangements for admission to the appropriate in-patient unit. Cath Team continues patient care and recovery until transfer is accomplished.

MANAGER/ADMIN.
- Receives 911 Activation page and proceeds immediately to Cath Lab
- Assist Cardiology with decision for closure to STEMI.
- If applicable, EM Systems updated with Temporary Diversion Status (time out after 2 hours).
- Arrange appropriate inpatient bed for patient.