

STEMI ALERT POCKET REFERENCE

STEMI hotline: 6-8111

ACS MINIMUM DISCHARGE REQUIREMENTS

for Core Measures & ACC Registries

Discharge Metric	STEMI and N-STEMI PCI, CABG or Medical Mgmt	All Other PCI Cases
Medications		
ASA	✓	✓
STATIN	✓	✓
CLOPIDOGREL (Plavix) PRASUGREL (Effient) TICAGRELOR (Brilinta)	✓ (one only)	✓
BETA BLOCKER	✓	○
ACE-I, ARB, ALDOSTERONE ANTAGONISTS LVSD <40%	✓	○
Referrals / Assessments		
LV FUNCTION ASSESSMENT (MRI, LV-GRAM, or ECHO)	✓ (post MI - before D/C)	○
CARDIAC REHAB	✓	✓
SMOKING CESSATION	✓	✓
LDL ASSESSED WITHIN 6 MOS	✓	○

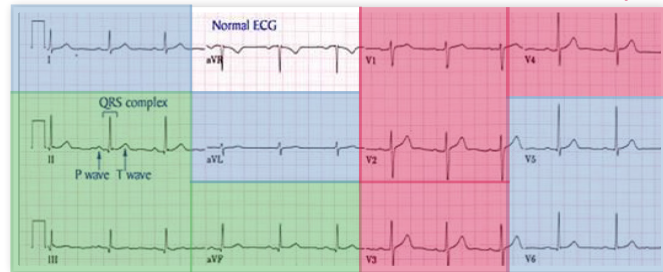
Please document any contraindication to required items in the **Discharge Summary**

✓ = Required ○ = Optional



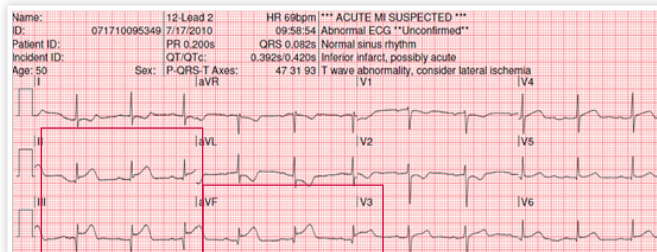
THE OHIO STATE UNIVERSITY
WEXNER MEDICAL CENTER

Green=Inferior Blue=Lateral Red=Anteroseptal



STEMI EKG Criteria: One of the following:

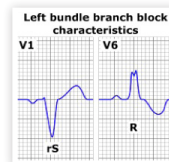
- > 1mm ST segment elevation in two or more contiguous limb leads
- > 2mm ST segment elevation in two or more contiguous precordial leads
- New Left Bundle Branch Block (LBBB)
- Isolated Posterior MI with ST depression in V2-3



ST Elevation



LBBB



Posterior MI



STEMI PROCESS

Potential ACS Symptoms?

- New onset pain/discomfort nose to navel
- Shortness of breath
- Nausea / Diaphoresis
- Weakness / lightheadedness / severe fatigue
- Unexplained change in vital signs or LOC

Obtain 12 lead EKG (stat)

Goal: EKG done and read within
10 minutes of symptom onset

Confirmed or Suspected STEMI?

Call STEMI hotline: 6-8111 for immediate
physician to physician cardiology consultation
(NP or PA may call if physician not available)

STEMI Alert is Activated

At the discretion of Interventional cardiologist

Transport to Cath Lab without Delay!

Goal: Patient in cath lab < 20 minutes from
onset of symptoms

Do not delay transfer for procedures or medications
unless requested by Cardiologist during consultation

STEMI TREATMENT

ACS General Treatment

To be done while waiting for EKG interpretation

- **Oxygen** 2 liters per NC to maintain O2 sat > 95%
- **Nitroglycerin*** 0.4 mg sublingual
- **Aspirin**** 81 mg X 4 (324 mg total), to be chewed

**Acceptable reason for not ordering NTG = symptomatic hypotension
Or phosphodiesterase inhibitor (sildenafil, tadalafil, vardenafil)*

***Acceptable reason for not ordering ASA = Allergy*

Additional Medications

Give only **ONE** of the following:

- **Clopidogrel** 600 mg oral
- **Prasugrel** 60 mg oral*
- **Ticagrelor** 180 mg*

**use Prasugrel or Ticagrelor only if requested/approved by
Interventional Attending physician*

Heparin 70 units/kg bolus IVP (max dose 7500 units)

No Medication Drips

*Consider Heparin 12units/kg/hr or NTG drip
only in cases where there is a delay to cath lab and time allows*

Do Not Delay Transport to the Cath Lab to Administer Medications!

Medication regimen will be completed in lab
as needed