CDHA STEMI Primary PCI Care Map

24/7 Ambulance Protocol

Capital Health

EHS evaluates patient with chest discomfort. Performs, interprets and transmits **ECG within 10 mins**

Paramedic performs the Reperfusion Checklist and **calls ED doc**

ED doc confirms STEMI

YES — NO → **To closest ED** for usual assessment of chest discomfort

ED doc determines suitability for Primary PCI

Contraindications:
1 Terminal comorbidities limiting lifespan to less than 1 year
2 Severe dementia

PCI decision

YES — NO → **To closest ED /** Consider Thrombolytic Therapy

to HI ED

EHS to initiate Primary PCI Treatment Algorithm

- keep SpO_2 greater than 90%
- at least 1 large bore IV (left arm) with normal saline at 30 ml/hr
- ASA 160-325 mg chewable po
- Clopidogrel 300 mg po
- Nitroglycerin SL or IV for chest pain
- Morphine 2 mg IV q5 min prn for ongoing chest pain not relieved by Nitroglycerin

ED doc activates Cath Lab prior to patient arrival

Nights / Weekends / Holidays
Call Primary PCI line: 473-7955
State: ***Call Primary PCI team and page Interventional Cardiologist.***

Mon-Fri 8 am-5 pm NOT holiday
473-6532 / 473-6633

CCU charge nurse calls ED Emerg Charge nurse
473-4961 to notify
if STEMI bed is unavailable.

arrives at HI ED

Mon-Fri 8 am-5 pm NOT Holidays

Nights / Weekends / Holidays

Is patient unstable? NO → **Paramedic calls CCU** 473-8981 / 473-3422 / 473-3423

YES

Unstable patients have
- Cardiogenic shock (SBP<90, Killip class >II)
- Respiratory distress requiring airway management
- Hemodynamically unstable heart block

Is STEMI bed available in CCU?

NO — YES

Take patient directly to Cath Lab

Take patient to ED until Cath Lab is ready ED doc continues PCI Treatment Algorithm *

Take patient to CCU until Cath Lab is ready Continue PCI Treatment Algorithm *

*** Primary PCI Treatment Algorithm**
- send blood for CBC, BUN, Cr, Lytes, INR, PTT, CK, glucose, high sensitivity troponin, group and screen
- Heparin 4000 units IV bolus

PCI

Is patient stable? NO → Transfer patient to HI CCU

YES

Did patient originate in Dartmouth? NO → Transfer patient to HI CCU / IMCU

YES → **Repatriate patient to DGH.**
Interventional team to give report to DGH ICU physician and ICU charge nurse regarding procedure
ICU charge nurse - phone 465-8414
DGH ICU physician - 473-2220 (locating)