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REMAC ADVISORY

2014 – 02: ST Elevation MI (STEMI) Identification

**Issued:** June 10, 2014

Effective Date: Current

Throughout the Collaborative Protocols, capture of 12-lead EKGs is recommended for a myriad of patient presentations beyond chest pain and cardiac dysrhythmias, including syncope, nausea/vomiting, shock, and stroke. The purpose of the casting this wide net is to improve the early identification of S-T elevation myocardial infarction (STEMI) events, divert these patients to a hospital with percutaneous coronary intervention (PCI) capabilities under on-line medical control (OLMC) physician direction and provide prompt notification to the receiving facilities to speed door-to-balloon times.

While data suggests that regional Paramedics over-triage a small percent of patients, missing STEMI events is thankfully a rare occurrence. Where these events are missed however, the Paramedic did not perform a 12 lead EKG for a variety of reasons. A recent circumstance involved the transfer of care from a primary medical office where previous EKGs were present and the medical staff offered opinions that the current EKG was unchanged. Despite current protocols, instead of obtaining an independent 12-lead EKG, the Paramedic relied on the medical office's records and opinion and sent the patient BLS to the hospital designated by the medical staff, which happened to be a PCI facility. Once in the ER, the patient was identified as in the process of having a STEMI. In addition to not properly evaluating and treating the patient pre-hospitally, the lack of a pre-notification to the hospital in the form of a 12-lead EKG resulted in avoidable delays processing the patient and the loss of valuable time for initiating reperfusion.

Where indicated in the Collaborative Protocols, Paramedics must perform their own 12-lead EKGs, consult with OLMC as required for diversion to PCI facilities, and transmit the EKGs to the receiving hospital in order to improve reception and treatment of the patient. The REMAC is proud that the Westchester Region has an excellent record of appropriately triaging patients suffering from a STEMI event to a facility that is best equipped to treat this medical emergency and seeks to ensure that this practice continues.

All ALS Agencies should ensure that their Paramedic staff have read this advisory.

Please refer all questions regarding this advisory to the Regional EMS office. Thank you for your attention to this matter.

Issued by:

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Chair, Westchester Regional Emergency Medical Advisory Committee