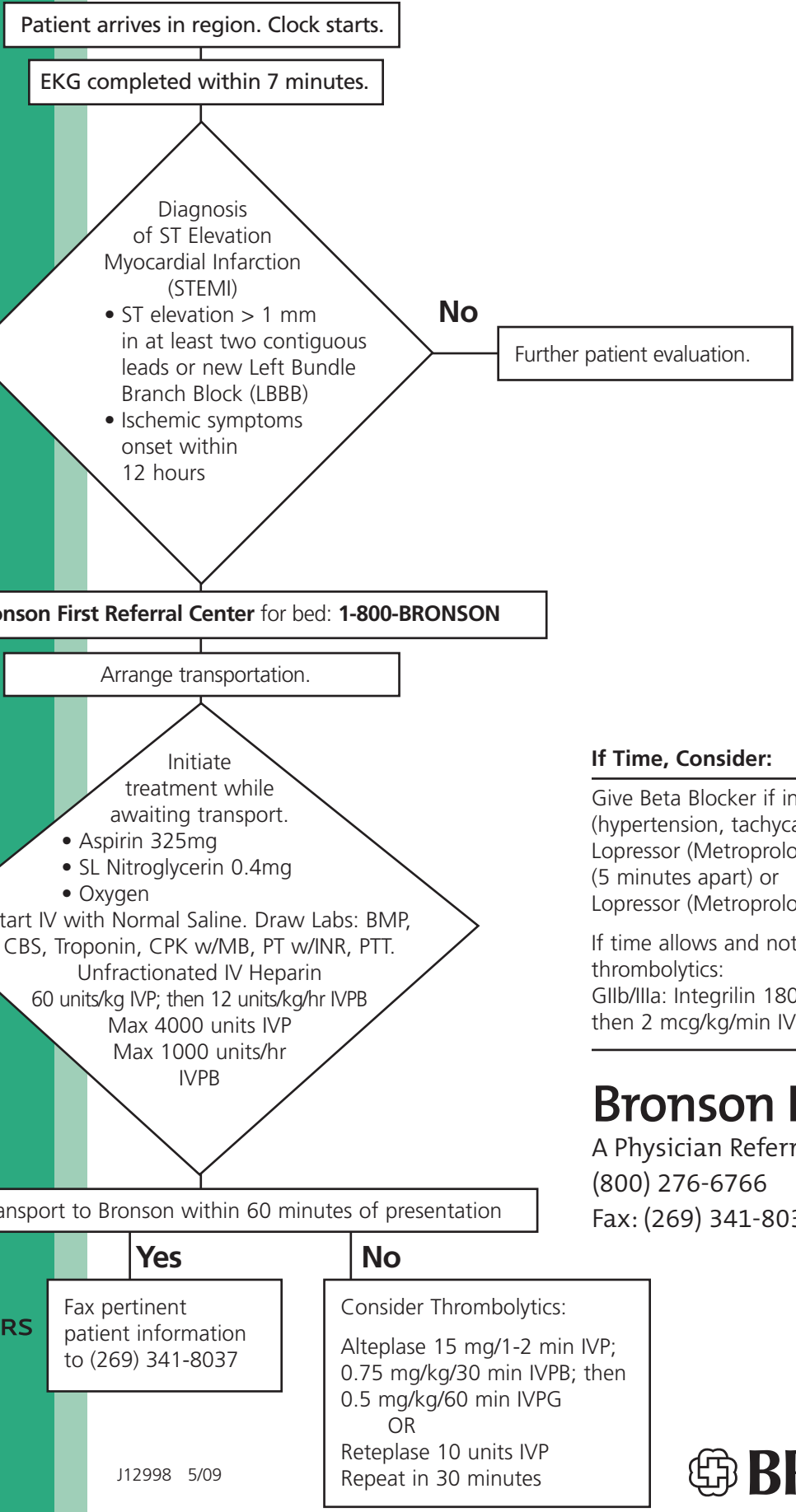


STEMI Regional Response Protocol



If Time, Consider:

Give Beta Blocker if indicated (hypertension, tachycardia):
 Lopressor (Metoprolol) 5 mg IV times 3 (5 minutes apart) or
 Lopressor (Metoprolol) 25-50 mg oral

If time allows and not giving thrombolytics:
 GIIb/IIIa: Integrilin 180 mcg/kg IVP then 2 mcg/kg/min IVPB

Bronson First
 A Physician Referral Center
 (800) 276-6766
 Fax: (269) 341-8037



Regional STEMI Response Protocol

Protocol Number: _____

PURPOSE

To rapidly identify and treat patients presenting to regional hospitals with symptoms of an acute MI. Once identified as a ST Elevation Myocardial Infarction (STEMI) or new Left Bundle Branch Block (LBBB), make transfer process to Bronson Methodist Hospital efficient and timely.

APPROVED AREAS

All Regional Hospitals transferring patients to Bronson.

PATIENT POPULATION

All patients presenting to regional hospitals with STEMI or new LBBB.

PROTOCOL STEPS

Regional hospital completes EKG on patient presenting with AMI symptoms within seven minutes of arrival.

- ST elevation > 1mm in at least two contiguous leads or new LBBB
- Ischemic symptoms onset within 12 hours
- Or candidate for intervention
- If none of the above, further evaluation of patient needed

Regional hospital to contact Bronson First Referral Center (BFRC) (1-800-BRONSON) for bed acceptance. BFRC to gather the following information:

- Patient choice of cardiologist if known
 - Estimated time of patient arrival to Bronson
- BFRC to initiate AMI calldown.

Arrange transportation via ground or air

- BFRC to offer help with transportation as needed

Initiate Treatment while awaiting transport:

- Aspirin 325 mg
- Nitroglycerin 0.4 mg SL
- Oxygen
- Start IV with normal saline
- Draw labs: BMP, CBS, Troponin, CPK w/MB, PT w/INR, PTT
- Unfractionated IV Heparin 60 units/kg IVP; then 12 units/kg/hr IVPB
 - Max 4000 units IVP/Max 1000 units/hr IVPB

If the transfer to Bronson is expected to take longer than 60 minutes, consider Thrombolytics as soon as possible:

- Alteplase 15 mg/1-2 min IVP; 0.75 mg/kg/30 min IVPB; then 0.5 mg/kg/60 min IVPB
- OR -
- Reteplase 10 units IVP; Repeat in 30 minutes

Fax pertinent patient information to 269-341-8037.

1. History of present illness
2. Past medical history
3. Past surgical history
4. Social history – illicit and prescription drug use, alcohol use, smoking
5. Current medications
6. Allergies to medication/soap/latex
7. EKG, Labs, studies completed
8. Treatment and medication started by regional provider

Send patient as soon as transportation available. Bronson interventionalist or ED physician will call referring hospital for report.

BRONSON METHODIST HOSPITAL STEPS

BFRC will contact BRIC to page AMI Calldown.

1. BFRC will send text message to the AMI calldown group and the interventionalist on call that states: Bronson AMI Call-Down-Regional Site, (i.e. Allegan) 341-6386.
2. Cath lab staff and cardiologist/interventionalist will immediately respond and arrive within 30 minutes.
3. First Referral will contact the ED to confirm receipt of page and confer with ED physician if needed. Cath lab call team charge will also confirm receipt of page.

BFRC will contact ED regarding patient.

Cath Lab will contact ED regarding their readiness status or upon arrival.

Patient will be direct admit to Cath Lab if stable and Cath Lab ready to accept patient.

Patient will report to ED if unstable or Cath Lab not ready to accept patient.