



THE LEADER IN CARDIOVASCULAR CARE

# STEMI Level One Heart Attack Protocol

### **STEMI CRITERIA:**

Signs and symptoms of Acute Coronary Syndrome (ACS)

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ST segment elevation of 1 mm or more in two contiguous leads

OR

New LBBB

- ❑ Contact Mercy Transfer Center (TC) at (877) 886-3729 and state you have a STEMI transfer. The Call Center will connect you to the on-call cardiologist and will arrange air transport if requested. The TC will guide you through the transfer process.

- ❑ Door-in to Door-out (DIDO) Goal is < 30 minutes.

#### ❑ **Consider Thrombolytic:**

Based on historical performance of Door to PCI times, sites are designated as Pharmacoinvasive (lytic therapy and transfer for PCI) or Primary PCI (no lytic therapy). Circumstances and delays (cardiac arrest, weather, etc.) should be considered. Each site should be prepared for rapid transport or lytic administration within 30 minutes.

Door 1 to Door 2: < 90 minutes • No thrombolytics	Door 1 to Door 2 : > 90 and < 180 minutes • Half dose thrombolytics	Door 1 to Door 2: > 180 minutes • Full dose thrombolytics
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- ❑ Monitor, Oxygen, 2 IV locks, Draw chest pain labs
- ❑ Aspirin 324 mg PO chewed
- ❑ Nitroglycerin 0.4 mg SL (repeat as needed)  
Consider IV nitroglycerin for systolic BP > 150 mmHG or diastolic BP > 100 mmHG
- ❑ Clopidogrel (Plavix) 600mg PO
- ❑ Heparin: IV loading dose of 60 units/kg (4,000 units maximum)
- ❑ Consider Metoprolol (Lopressor) 5 mg IV q 5 minutes x 3  
*Do not administered if patient has signs of heart failure, evidence of low output state, increased risk for cardiogenic shock or other relative contraindications to beta blockade (PR > 0.24 seconds, 2nd or 3rd degree heart block, active asthma or reactive airway disease).*
- ❑ STAT Portable Chest X-ray. Do not let this be a reason for delay. Send with patient.
- ❑ Analgesia (Morphine Sulfate or Fentanyl) PRN for pain
- ❑ Consider sedation with Versed or Ativan for transport
- ❑ **Fax demographics, EKG and clinical data sheets to 888-764-8218**  
Mercy Transfer Center will forward to appropriate areas