

STEMI Management Guidelines for Inter-facility Transfer

Heart Alert Criteria

1. Patients with signs & symptoms of an Acute Coronary Syndrome (ACS)*
 - **AND** -----
2. ST segment Elevation of 1mm or more in 2 contiguous leads

If your patient does not meet Criteria 1 AND 2, a consult should be done with the receiving ED physician prior to declaring a Heart Alert.

*ACS Symptoms include but are not limited to chest pain/tightness; radiation to back, abdomen, arm(s), neck, jaw or any combination; dyspnea; diaphoresis; nausea/vomiting; fatigue; weakness; palpitations; indigestion; syncope; pulmonary edema.

Thrombolytic Algorithm

- Confirmed STEMI on 12 lead?
 - ↓ **YES:** Activate "Heart Alert" as early as possible.
 - **NO:** patient not in STEMI guideline at this time.

- Begin thrombolytic contraindications checklist immediately

- a. Onset of symptoms <12 hours: administer full dose thrombolytic* and transfer urgently to PCI Center.
- b. Onset of symptoms >12 hours: consider thrombolytic and consult with receiving facility.
 - *Fibrin-specific agents preferred: tenecteplase (TNKase) or reteplase (Retavase)



Green County Goal: Door to Thrombolytic in < 30 minutes and urgent transfer to PCI Center

- Countries that do not have a PCI Center: administer full dose thrombolytic



Red County Goal: Door to PCI in < 120 minutes

- Countries with PCI Centers: consider administering full dose thrombolytic if delay in arrival to PCI Center

Bexar County PCI Centers:

- Baptist Medical Center
- Christus Santa Rosa Medical Center
- Christus Santa Rosa Westover Hills
- Methodist Hospital
- Methodist Stone Oak Hospital
- Methodist TexSan Hospital
- Metropolitan Methodist Hospital
- Nix Medical Center
- North Central Baptist Hospital
- Northeast Baptist Hospital
- Northeast Methodist Hospital
- San Antonio Military Medical Center
- Southwest General Hospital
- St. Luke's Baptist Hospital
- University Hospital
- Comal County PCI Centers:
 - Christus Santa Rosa New Braunfels

