# **STEMI Management Guidelines for Inter-facility Transfer**

## **Heart Alert Criteria**

----- AND -----

1. Patients with signs & symptoms of an Acute Coronary Syndrome (ACS)\*

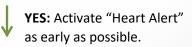
2. ST segment Elevation of 1mm or more in 2 contiguous leads

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.

# Fibrinolytic Guidelines

Confirmed STEMI on 12 lead?



NO: patient not in STEMI guideline at this time.

Southwest Texas Regional Advisory Council

- Begin fibrinolytic 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 Alteplase (tPA)

#### **Bexar County PCI Centers**

**Baptist Medical Center** Christus Santa Rosa Westover Hills Methodist Hospital Methodist Stone Oak Hospital Methodist Texsan Hospital Metropolitan Methodist Hospital Mission Trail Baptist

North Central Baptist Hospital

Northeast Baptist Hospital

Northeast Methodist Hospital

San Antonio Military Medical Center St. Luke's Baptist Hospital

**University Hospital** 

#### **Outside Bexar Co PCI Centers**

Christus Santa Rosa New Braunfels Baptist Resolute Hospital (NB) Peterson Regional (Kerrville)

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

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

## Red County Goal: Door to PCI in <120 minutes

