



# CODE STEMI Protocol

URGENT Transfer to UOHI for PHARMACO-INVASIVE

## ONSET OF SYMPTOMS <12 HRS:

Clinical presentation in keeping with acute myocardial ischemia, i.e.: discomfort chest, jaw, back, stomach or dyspnea



## 12 LEAD ECG CRITERIA:

~1 mm ST-segment elevation in 2 contiguous leads



Show the ECG to the ED Physician within 10 minutes of hospital arrival

## CONFIRM (LARGE OR SMALL) STEMI AND ADMINISTER THE FOLLOWING:

### STANDARD MEDICATIONS:

1. TNK: weight adjusted IV bolus, unless contraindicated
2. Aspirin (ASA): 160 mg chewable
3. Clopidogrel: 300 mg (~75yrs);  
no Clopidogrel with fibrinolytics if > 75 yrs
4. Unfractionated Heparin: IV bolus 60u/kg (max 4000u) and Initial IV infusion 12u/kg/h (max 1000u/kg/hr)  
\*Do NOT use low molecular weight heparin (LMWH)

### UOHI CONTACTS:

Daytime: 08:00-16:00 hrs  
Tel: 613-696-7000 Ext. 67061  
Fax: 613-696-7144

**Off-hours:**  
Nursing Coordinator  
Tel: 613-696-7000, dial 0  
Fax: 613-696-7143

## URGENT TRANSFER PROTOCOL

Inform Patient of transfer to the Ottawa Heart Institute

Call dispatch and arrange for ambulance transfer

Send the following with patient (if not possible, fax documents):

- ECG, Emergency Department triage notes
- Ambulance Call Report, if patient presented by EMS
- CBC with platelet count\*
- Lytes, creatinine, glucose\*

\* Do not delay transfer, patient can be sent without these.

Send appropriate personnel with patient (if transfer by land ambulance).

Call to notify Ottawa Heart Institute of the transfer and provide name of patient, referring physician, referring hospital, ETA, mode of transport (air/land) and a short history.

## TIME IS MYOCARDIUM, MINUTES COUNT!

**S**ymptoms of cardiac ischemia warrant an ECG

**T**arget: Door-to-ECG within 10 minutes

**E**mergency physician triages patient for Urgent Transfer

**M**edications: TNK, ASA, Clopidogrel (~75yrs), Unfractionated Heparin

**I**nform Ottawa Heart Institute of patient transfer upon ambulance departure