



CHEST PAIN / ACUTE CORONARY SYNDROME

ADULT

BLS Procedures

- Administer oxygen as indicated
 - Refer to [Policy 533-02 Airway Management](#)
- Assist patient with prescribed **Nitroglycerin** (NTG) as needed for chest pain
- Hold if SBP < 110 mmHg

Expanded Scope

Same as BLS

ALS Prior to Base Hospital Contact

Perform 12-Lead ECG

- Refer to [Policy 539: 12-Lead ECG](#)
- If "MEETS ST ELEVATION MI CRITERIA" or "****ACUTE MI SUSPECTED****" is present:
 - Place defibrillation pads on the patient and expedite transport to the closest STEMI Receiving Center (SRC)*

For patients with symptoms of acute coronary syndrome without chest pain

- Contact the Base Hospital prior to medication administration (if possible)

For ongoing or recurrent chest pain consistent with acute coronary syndrome

Nitroglycerin (Withhold if ECG states Inferior MI)

- Sublingual or lingual spray – 0.4mg every 5 mins for continued pain
 - No max dosage
- Maintain SBP > 110mmHg
 - If normal SBP < 110mmHg, then maintain SBP > 90mmHg

Aspirin

- PO – 324mg

Vascular Access

- 2 attempts prior to base hospital contact

*Pain refractory to **Nitroglycerin***

- Refer to [Policy 533-03: Pain Control](#)
- Maintain SBP > 110 mmHg

Hypotension present and/or develops

- Elevate legs
- Unless signs of CHF are present, **Normal Saline**
 - IV/IO bolus – 250mL

Ventricular ectopy – Runs of V-Tach (wide-complex, HR > 150bpm, > 30sec duration)

Amiodarone

- IV/IO – 150mg in 100mL 0.9% **Normal Saline** administered over 10 mins

Base Hospital Physician Orders Only

Hypotension, signs of CHF are present, and/or no response to fluid therapy

Push-Dose Epinephrine

- IV/IO – 10mcg (1mL) every 3 mins slow IV push
- Titrate to SBP > 90mmHg
- Refer to [Policy 533-10: Push Dose Epinephrine](#)

Consult with ED Physician for further treatment measures.

Additional Information

Medication Considerations:

- Perform 12-lead ECG prior to medication administration (if possible)
- **Nitroglycerin** is contraindicated when phosphodiesterase (PDE) medications (**Viagra®**, **Levitra®**, and **Cialis®**) have been recently used (**Viagra** or **Levitra** within 24hours; **Cialis** within 48hours). **Nitroglycerin** may only be given by BH Physician Order.

**Transport Considerations:*

- 12-Lead ECG interpretation of "MEETS ST ELEVATION MI CRITERIA" or "****ACUTE MI SUSPECTED****"
 - Do not routinely transport STEMI patients Code-3
 - Consider Code-3 transport for unstable vital signs and/or patient condition