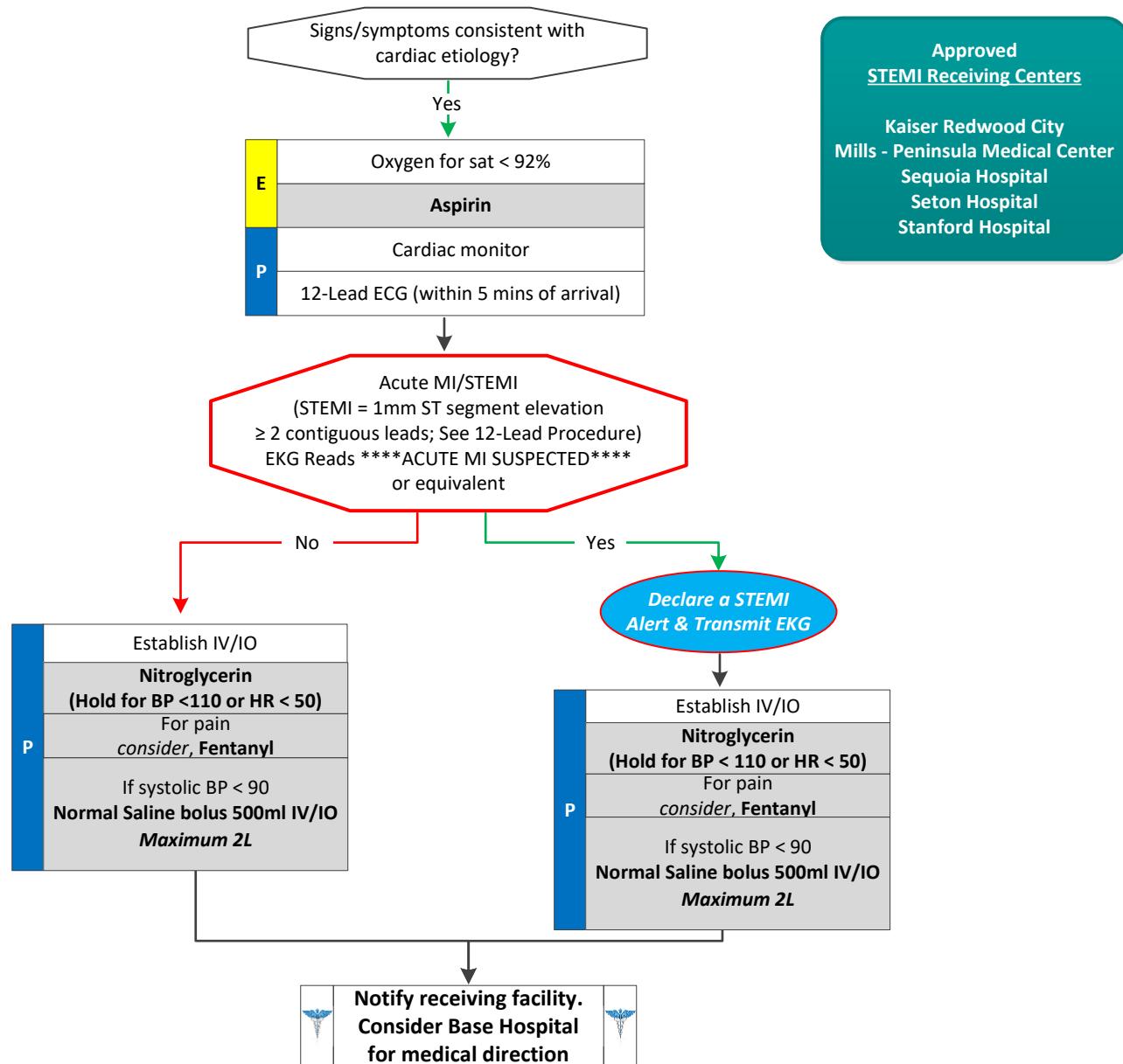


Chest Pain: Suspected Cardiac

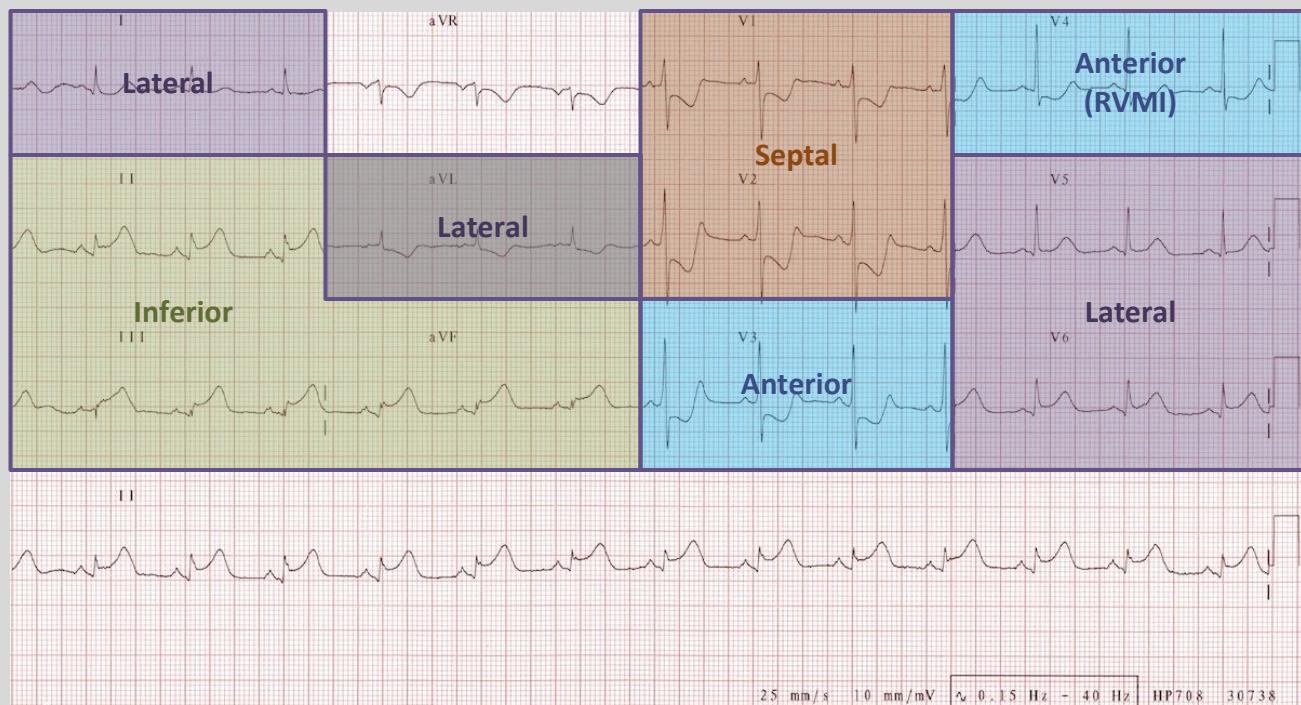
For any chest pain that is of possible cardiovascular etiology, but NOT STEMI (e.g., non-STEMI, pericarditis, dissection)

History	Signs and Symptoms	Differential
<ul style="list-style-type: none"> Age Medications (Erectile dysfunction medications) Past medical history (e.g., MI, angina, diabetes, or post menopausal) Allergies Recent physical exertion Onset Provocation Quality (e.g., pressure, constant, sharp, dull, etc.) Region/Radiation/Referred Severity (0 – 10 scale) Time (onset/duration/repetition) 	<ul style="list-style-type: none"> Heart rate < 60 with associated hypotension, acute altered mental status, chest pain, acute CHF, seizures, syncope, or shock secondary to bradycardia Chest pain Respiratory distress Hypotension or shock Altered mental status Syncope Nausea Abdominal Pain Diaphoresis 	<ul style="list-style-type: none"> Acute myocardial infarction Hypoxia Pacemaker failure Hypothermia Sinus bradycardia Athletes Head injury (elevated ICP) or stroke Spinal cord lesion Sick sinus syndrome AV blocks (e.g., 1°, 2°, or 3°) Overdose



Chest Pain: Suspected Cardiac

For any chest pain that is of possible cardiovascular etiology, but NOT STEMI (e.g., non-STEMI, pericarditis, dissection)



Pearls

- Avoid Nitroglycerin in any patient who has used Viagra (Sildenafil) or Levitra (Vardenafil) in the past 24 hours or Cialis (Tadalafil) in the past 36 hours due to the potential of severe hypotension.
- Avoid Nitroglycerin in patients who are having an inferior STEMI
- Many STEMIs evolve during prehospital care and may not be noted on the initial 12-Lead ECG.
- An ECG should be obtained prior to treatment for bradycardia if patient condition permits.
- If a patient has taken their own Nitroglycerin without relief, consider potency of medication. Provider maximum doses do not include patient administered doses.
- Monitor for hypotension after administration of nitroglycerin and opioids.
- Diabetics, geriatric, and female patients often have atypical pain, or only generalized complaints. Suspect cardiac etiology in these patients, and perform a 12-Lead ECG.

