

# EL DORADO COUNTY EMS AGENCY

## FIELD POLICIES

Effective: July 1, 2015

Reviewed: July, 2017

Revised: July, 2019



EMS Agency Medical Director

### STEMI DESTINATION

#### PURPOSE:

A Cardiovascular STEMI Receiving Center (SRC) will be the preferred destination for patients who access the 9-1-1 system meeting defined criteria and who show evidence of a ST-elevation myocardial infarction (STEMI) on a 12 Lead electrocardiogram.

#### POLICY:

The following factors should be considered with regards to choice of destination for STEMI patients:

1. An EDCEMSA designated SRC should be considered as the destination of choice when the following criteria are met:
  - Identified STEMI patients based on machine interpretation of field 12 Lead ECG, verified by paramedics and, via telemetry, by the base hospital physician(s).
    - 12 Lead ECG machine interpretations reading "Acute MI", "Acute MI Suspected", "ST Elevation Criteria Met", or "STEMI" are accepted as consistent with an acute MI.
  - **Total estimated time is 45 minutes or less from confirmation of STEMI to the arrival at the SRC**
    - Consideration should be given to traffic, weather, road conditions, and other possible travel time factors.
2. Patients who are in **extremis** should be transported to the closest hospital.
3. Patients with a history of **high risk indicators** who are outside the 45 minute SRC transport window may be considered for transport directly to the SRC despite being outside the 45 minute transport window. **Contact the base hospital for consultation in this situation.**

#### High risk indicators:

- Active internal bleeding
  - Surgery within the last 14 days
  - Pregnancy
  - History of cerebrovascular accident (CVA) within the last three(3) months
  - Intracranial or intraspinal surgery or trauma within the past two (2) months
  - Known intracranial neoplasm, arteriovenous malformation, or aneurysm
  - Known bleeding disorder
  - Severe uncontrolled hypertension
4. Air ambulance/rescue helicopter transport may be considered for remote areas if the time window of 45 minutes from STEMI confirmation to arrival at the SRC can be maintained. **The base hospital should be included in the decision to fly a STEMI patient to a SRC.**
  5. Selection of which SRC the patient is transported to will be based on paramedic discretion **AND:**
    - Proximity and travel time to the closest SRC
    - Patient's hospital preference
    - Helipad if transporting by air ambulance

6. Paramedic Responsibilities:

- Notify the base hospital physician of a "STEMI ALERT" as soon as STEMI is identified.
- Begin transporting towards the most appropriate SRC as soon as possible with base hospital communications conducted while enroute.
- Transmit 12 lead EKG to Base Hospital – Confirm the EKG was received.
- Contact Base Hospital - Give patient report to include: age, sex, history, anticoagulants, Insulin, erectile dysfunction or other critical medications, allergies, vital signs, and treatment and ETA to SRC.
- Identify the SRC the patient is being transported to and Transmit/Fax EKG as quickly as possible as this will expedite activation of the Cath Lab Team.
- Call report to the SRC 10 minutes out.

7. Base Hospital Responsibilities

- The base hospital should confirm they have received the correct EKG by verifying the time, date, patient last name, age of patient, and medic unit ID number on the EKG
- Base Physician will interpret EKG and confirm or cancel STEMI Alert
  - If STEMI is cancelled base hospital will direct to nearest facility
- MICN will fax copy of 12 lead EKG to SRC
- MICN will notify SRC of **STEMI ALERT** and pending patient arrival to include brief patient report, medic unit, ETA and **Confirm receipt of 12 lead EKG**

**Approved SRC List:****Helipad**

UC Davis  
Sutter Roseville  
Mercy San Juan  
Carson Tahoe

**No Helipad**

Kaiser Roseville  
Sutter Medical Center (Sac)  
Mercy General