## Chest Pain – Suspected Acute Coronary Syndrome (ACS)

The term ACS includes unstable angina (UA), non-ST elevation MI (NSTEMI), and ST elevation MI (STEMI). Assess and treat life-threatening arrythmias prior to utilizing this protocol

## <sup>2</sup>Remember to look for **Posterior STEMIs!**

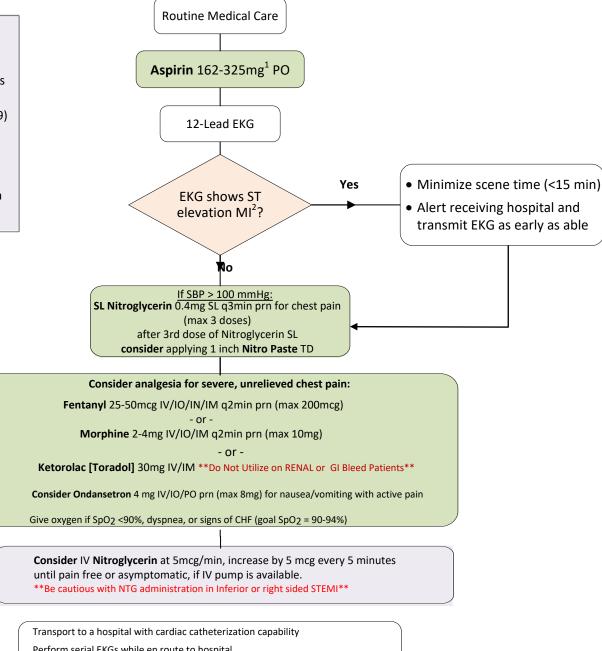
- You will see ST depressions (often >2mm) in V1-V3.
- Posterior EKG (leads V7-V9) with ST elevation will confirm the diagnosis.

Isolated LBBB in a stable patient is not an indication for STEMI activation

## NTG Contraindications

- SBP < 100mmHg
- · Recent use of erectile dysfunction medication (Viagra/ Levitra within 24 hours, Cialis within 48 hrs)

Suspected RV infarct<sup>3</sup> is a relative contraindication (monitor for hypotension)



Perform serial EKGs while en route to hospital

Observe and treat patient for signs of clinical deterioration (e.g. dysrhythmias, SOB, shock) - apply defib pads if not already done

- ACS can present atypically consider a cardiac etiology when patients reports SOB, sweating, nausea/vomiting, dizziness, syncope, or vague/generalized complaints. Atypical symptoms are most common in women, the elderly and diabetic patients.
- Document the patient's cardiac risk factors (outlined in the Cardiac Preambles) in the EMS Run Report.
- Document patient's own aspirin use within the last 24 hours. Aspirin (ASA) is contraindicated in patients with current and recent GI bleeding. The term "recent" includes bleeding requiring hospitalization or blood product transfusion within the last 6 months.
- <sup>2</sup> Nitroglycerin (NTG) If blood pressure drops significantly after a single NTG dose, discontinue NTG use. Treat NTG-induced hypotension (SBP <100) with Crystalloid fluid bolus 250 ml IV.
- <sup>3</sup> Consider an RV infarct in all inferior STEMIs (leads II, III, AvF) with hypotension. ST elevation in lead V4R (obtain a right sided EKG) helps to make this diagnosis. Hypotension and bradycardia are common.
- Morphine use in NSTEMI is controversial and may inhibit antiplatelet medications. Use opiates judiciously.

