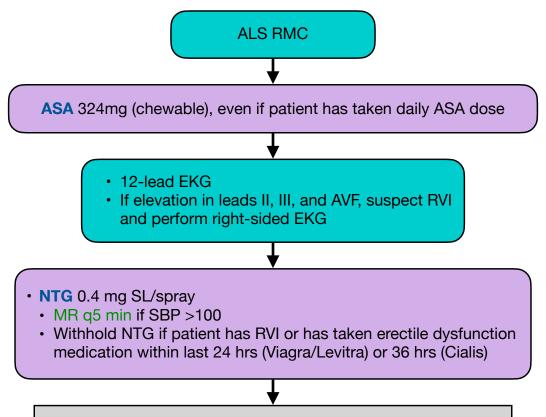
CHEST PAIN/ACUTE CORONARY SYNDROME

Indications

- · Chest discomfort or pain, suggestive of cardiac origin.
- Other symptoms of Acute Coronary Syndrome (ACS) may include weakness, nausea, vomiting, diaphoresis, dyspnea, dizziness, palpitations, indigestion
- Atypical symptoms or "silent MIs" (women, elderly, and diabetics)



- If pain persists, treat per Adult Pain Management policy
- Consider NS 250ml IV/IO bolus if SBP <100
- For recurrent episodes of VT with persistent CP, administer
 Amiodarone 150mg in 100ml NS, IV/IO; infuse over 10 min
 - MR q10 min as needed

SPECIAL CONSIDERATIONS

- IV access before NTG if SBP <120 or Patient doesn't routinely take NTG
- Routine O2 administration unnecessary if SpO2 ≥94%
- Infarctions may be present with normal 12-leads
- Consider other potential causes of chest pain: pulmonary embolus, pneumonia, aortic aneurysm, and pneumothorax
- Physician consult if possible contraindication to aspirin (ie: head injury, Gl bleed, etc.)