

(place patient label here)

Patient Name: _____



PROVIDER ORDERS

Order Set Directions:

- > (✓)- Check orders to activate; Orders with pre-checked box will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
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Diagnosis: _____

Allergies with reaction type: _____

ED Acute MI/STEMI

Version 2 4/2/19

Nursing Orders

- Cardiac monitor
- Pulse oximetry , continuous
- Vital signs STAT, with blood pressure in both arms
- Oxygen Delivery RN/RT to Determine Titrage to maintain Oxygen saturation greater than 94%
- ED ECG (ED Provider Only): WITHIN 5 minutes of admission. Reason for exam: Chest pain (MARK V1-V4 position)
- Once ER provider confirms MI: activate Code STEMI; Call cath lab and cardiologist (Within 5 minutes) and prep for cath lab
- If patient going to cath lab:
 - Remove all clothing, valuables to security or family
 - Prep/ clip groins bilaterally
 - Obtain written authorization for emergency cardiac angiogram and angioplasty
 - Place AP defib pads and on Zoll monitor
 - Place electrodes on torso for cath lab
 - Cath lab team to bedside for patient transport

Diet

- NPO

IV/ Line Insert and/or Maintain

- Peripheral IV insert/maintain x 2; Avoid using right wrist

IV Fluids

- Sodium Chloride 0.9% IV
 - 50 milliliter/hour continuous intravenous infusion

Medications

Primary Therapy per Cardiology Preference (Select if not already ordered)

- aspirin chewable
 - 324 milligram orally once
- morphine
 - 2 milligram intravenously every 5 minutes as needed for chest pain not relieved by nitroglycerin (give up to MAX of 10 milligram for a single chest pain episode within one hour)
- Avoid heparin if patient has a history of heparin induced thrombocytopenia
 - heparin (porcine) 5,000 unit/mL injection
 - 60 unit/kilogram intravenously once initial dose; maximum 5,000 units.
 - ticagrelor (BRILINTA)
 - 180 milligram orally once
 - metoprolol tartrate (LOPRESSOR)
 - 25 milligram orally once now -Hold for systolic BP less than 90 mmHg or Heart rate less than 50 bpm
 - 5 milligram intravenously as needed for persistent ischemia, EKG changes AND Systolic BP greater than 120 mmHg, or Heart rate greater than 100 bpm may repeat in 5 minutes x 2; MAX 15 milligram; -Hold for systolic BP less than 90 mmHg or Heart rate less than 50 bpm
 - atorvastatin (LIPITOR)
 - 80 milligram orally once

Adjunctive Therapy per Cardiologist Preferences

- Select if not already ordered:
- Do not use nitroglycerin if patient used sildenafil et. al. within past 24 hours or Cialis within past 48 hours
- nitroglycerin 0.4 mg sublingual tablet (NITROSTAT)

Initials _____

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- 1 tablet sublingually as needed for chest pain May repeat every 5 minutes with MAX of 3 doses for a single chest pain episode within one hour; Hold for systolic BP less than 90 mmHg; Notify provider if MAX of 3 doses is given
- nitroglycerin in D5W 25 milligram/250 milliliter
- 5 microgram/minute continuous intravenous infusion titrate for chest pain to MAX 20 microgram/minute; Hold for systolic BP less than 90 mmHg

Pressor Drips

- Select only if hypotensive
phenylephrine in D5W (preserv free) 20 mg/250 mL (80 mcg/mL) IV (NEO-SYNEPHRINE)
 - 10 microgram/minute continuous intravenous infusion titrate to keep SBP greater than 90 mmHg; MAX 180 microgram/minute
- Select only if heart rate is less than 50 bpm and hypotensive
DOPamine in D5W 400 mg/250 mL (1,600 mcg/mL) IV
 - 5 microgram/kilogram per minute continuous intravenous infusion : titrate to keep SPB greater than or equal to 90mmHg and MAP greater than or equal to 65 mmHg

Thrombolytic Therapy

- Primary PCI is the preferred strategy, but if PCI cannot be performed within 120 minutes of first medical contact, fibrinolysis should be performed if no contraindications exist.
- SELECT TNKase IF not primary candidate for PCI and Onset of MI < 6 hours, GOAL DOOR TO DRUG WITHIN 30 MINUTES
- AND patient has no absolute contraindications (See evidence link for contraindications)
- AND risk of intracranial hemorrhage is less than 2.5%

For weight < 60 kg Select:

- tenecteplase (TNKase)
 - 30 milligram intravenously

For weight 60-69 kg Select:

- tenecteplase (TNKase)
 - 35 milligram intravenously

For weight 70-79 kg Select:

- tenecteplase (TNKase)
 - 40 milligram intravenously

For weight 80-89 kg Select:

- tenecteplase (TNKase)
 - 45 milligram intravenously

For weight > 90 kg Select:

- tenecteplase (TNKase)
 - 50 milligram intravenously

Laboratory

STAT Labs (If not already done)

- | | |
|--|---|
| <input type="checkbox"/> CBC/AUTO DIFF | <input type="checkbox"/> TROPONIN I |
| <input type="checkbox"/> BASIC METABOLIC PANEL | <input type="checkbox"/> PT (PROTIME AND INR) |
| <input type="checkbox"/> COMPREHENSIVE METABOLIC PANEL | <input type="checkbox"/> PTT |
| <input type="checkbox"/> MAGNESIUM, PLASMA | |

Radiology and Diagnostic Tests (If not already done)

- XR Chest Single portable, STAT Reason for exam: Chest pain

Provider Signature: _____ Date: _____ Time: _____