ED Risk Stratification for Patients Suspicious for ACS: HEART Score

**Signs and Symptoms of ACS**

**Diagnostics:**
- Perform and read EKG within 10 Min. of arrival
- Draw baseline troponin

**ED Provider:**
- Calculate HEART Score

**HIGH RISK Clinical Criteria Met?**
- STEMI/NSTEMI-ACS
  - Elevated Troponin
  - Dynamic EKG Changes
  - HEART score of 7-10

**NO**

**HEART score 0-1 Points**
Very Low Risk for ACS

- Discharge Patient
- Follow up with PCP/Cardiology

**HEART Score 2-3 Points**
Low Risk of ACS

- Place in OBS under PCP, Hospitalist or Cardiologist
- Repeat Troponin/EKG at 3 and 6 hours, then appropriate stress Test If applicable.

**ED Provider:**
- Contact patient’s PCP, cardiologist or AHI Triage Message Line for Cardiology F/U

**Dispo with Outpatient Stress Test?**
- YES
  - Include Stress Test Instructions for F/U
- NO

**Risk factors Include:**
- Diabetes Mellitus
- Current/recent Smoking
- Hypertension
- Hypercholesterolemia
- Family History CAD
- Obesity

**HEART Score 4-6 points**
Intermediate Risk

- YES
  - Initiate STEMI care if STEMI
  - Initiate NSTEMI/Unstable angina
  - Admit to Cardiology

**NO**

**Symptom onset within 6 hrs of ED Presentation?**
- YES
  - Repeat EKG
  - Repeat Troponin
  - Re-calculate HEART score
- NO

**NO**

**Discharge Patient**
- Include Stress Test Instructions for F/U

**ED Provider:**
- Admit to OBS with rising troponin

**3 hours after 1st troponin/EKG:**
- Repeat EKG
- Repeat Troponin
- Re-calculate HEART score