Low risk ACS-Heart Score 0-3

EKG interpreted that does not reveal STEMI within 10 min of arrival. Repeat Q 15 in for continued signs of ACS.

ED Provider calculates HEART Score

Serial Troponin and EKGs at 0-3-6 hours.

Positive troponin, Dynamic EKG changes or clinical high risk symptoms

YES

STEMI?

YES

Activate STEMI alert and appropriate protocol (PCI or Fibrinolytics)

NO

Recalculate HEART score:
- If 4-6, go to Intermediate Risk pathway
- If 7-10, go to High Risk Pathway

Further testing to evaluate other cause of symptoms (PE, pericarditis, etc.)

NO

Cause of chest pain/ determined?

NO

ED MD consults with Hospitalist /PCP

YES

Treat patient appropriately based on diagnosis

Admit to OBS status:
- Cont. serial troponins
- Cont. serial EKG’s, stat prn Q 15 minutes for suspicion of ACS
- Stress testing prior to DC as applicable
- Transfer to tele or other inpatient unit ASAP (within 6 hours of presentation)

Does PT have PCP/Card

NO

Patient discharged home with follow up with cardiology/CPC. Stress test within 72 hours, if applicable. Patient education to include risk factors, healthy lifestyle and call 911 for symptoms

YES