

**Mission: Lifeline
 Baseline Assessment
 Non- PCI Hospital**

Please return completed Assessments by email or fax to:

Hospital Name:	
City, State:	
Healthcare System	
Key Contact (s):	
Position Held:	

1. Who is the first person a patient sees when arriving at your ED (by personally owned vehicle)?	
a. Greeter	b. Triage Nurse
c. Registration Staff	d. Other
2. If a suspected STEMI patient is brought in by EMS (with possibility of transfer), is the patient left on the EMS stretcher to be evaluated?	
a. Yes	b. Yes, sometimes
c. No	
3. If a patient is brought to your ED by EMS with a pre-hospital ECG identifying STEMI, do you repeat the ECG? Circle all that apply.	
a. Yes, we need to confirm the diagnosis	b. No, we treat the patient based on the EMS ECG
c. Yes, we need our own ECG for medical records	d. Other

4. Does your hospital have a 12 lead ECG triage protocol, “who gets a 12 lead”, and is it posted?	
a. Yes, we have one and it is posted.	b. Yes, we have one; but it is not posted.
c. No, but we are working to obtain one.	d. No, we do not have one.
5. Who performs the 12 lead ECG on patients with suspected acute cardiac patients in your ED? Circle all that apply.	
a. ECG Tech	b. ED Nurse
c. ED Tech	d. Other
6. Is this person located within your emergency department?	
a. Yes	b. No
7. Do you have appropriate protocols and standing orders in place for the identification of STEMI?	
a. Yes	b. No
8. If you have such protocols, do you have them present for the Intensive Care Unit/Coronary Care Unit and Emergency Department?	
a. Yes	b. No
9. Does your ED maintain a standardized reperfusion STEMI care pathway that designates primary PCI as the preferred reperfusion strategy if transfer of the patient to a primary PCI hospital/STEMI receiving center can be achieved within time consistent with ACC/AHA guidelines?	
a. Yes	b. No
10. Does your ED maintain a standardized reperfusion STEMI care pathway that designates fibrinolysis in the ED (for eligible patients) when the system cannot achieve times consistent with ACC/AHA guidelines for primary PCI?	
a. Yes	b. No

11. Do you have a program in place to track and improve treatment (acutely and at discharge) with ACC/AHA guideline based Class I therapies?	
a. Yes	b. No
12. Do you have a multidisciplinary STEMI team that includes EMS that reviews hospital specific STEMI data on a quarterly basis?	
a. Yes	b. No
13. What is the <u>most commonly</u> used reperfusion strategy in your ED?	
a. Fibrinolytics and admit	b. Fibrinolytics and immediate transfer
c. Transfer for primary PCI	d. Other (please describe)
14. Do you have a back up reperfusion strategy/plan depending on availability of transport, weather, traffic, etc?	
a. Yes	b. No
15. Do you have and routinely use a fibrinolytic exclusion checklist?	
a. Yes	b. No
16. If your ED uses fibrinolytics, are they stored in the ED?	
a. Yes	b. No
17. If your ED uses fibrinolytics, does the ED physician consult another physician or a cardiologist before administration?	
a. Yes, calls a Cardiologist	b. Yes, Calls patient's primary doctor
c. Only on uncertain dx	d. ED doc makes reperfusion decisions
18. Does your ED have a relationship with primary PCI Hospitals, whereby you can call a "Hotline" for patient transfer acceptance and cath lab activation?	
a. Yes.	b. No.

19. If you transfer for primary PCI, what is the most frequently used mode of transport?	
a. Local EMS or other ground ambulance	b. Air medical helicopter
c. Critical Care Ground	d. Other
20. Do you have a pre-determined transfer for PCI plan for fibrinolytic ineligible & shock patients?	
a. Yes.	b. No.
21. If EMS leaves a copy of their run record/patient care report, where does that documentation go?	
a. On the chart	b. In a bin to be collected later by medical records
c. Not used or discarded	d. Other (please explain)
22. How far is your hospital from a primary PCI center (can use mapquest if necessary)? Please list all primary PCI Hospitals that you refer to below.	
Hospital _____	Ground _____ miles _____ minutes
	Air _____ miles _____ minutes
Hospital _____	Ground _____ miles _____ minutes
	Air _____ miles _____ minutes
Hospital _____	Ground _____ miles _____ minutes
	Air _____ miles _____ minutes

The following question lists several data measures. Although the data measures are grouped by EMS, PCI Hospital, Non-PCI Hospital and System, please read each measure to determine whether it is applicable to your group. If you do not capture or record a measure, please leave the column blank for that measure.

23. Which of the following STEMI related data measures does your Agency / Hospital currently capture/record? Please refer to the following example. No specific data is requested.

E - Electronic, only capture electronically

M - Manual, only capture manually

B - Both, use both electronic & manual methods

EXAMPLES

Data Measure	Capture / Record?	Method	Comment
Arrival at ED	Y	B	Manual then transferred to electronic record

EMS Transport

Data Measure	Capture / Record	Method	Comment
Time interval from EMS dispatch to vehicle arrival at hospital door			
Patient Contact to First 12 Lead ECG			
Time interval from symptom onset to EMS dispatch			
Time from prehospital 12 Lead ECG to balloon inflation (first device used)			
Time from first medical contact to balloon inflation (first device used)			
Percentage of patients confirmed by the Hospital to be STEMI who also had an EMS acquired 12 lead ECG			

PCI / STEMI Receiving Hospital			
Data Measure	Capture / Record?	Method	Comment
Door to first 12 lead ECG (if no EMS ECG)			
Cardiac cath lab staff & interventionalist time interval from notification to arrival			
Interventionalist procedure volume of primary PCI and total PCI			
Facility procedure volume of primary PCI and total PCI			
Track compliance with ACC/AHA Class I therapies			
In hospital mortality of STEMI patients			
Time from prehospital 12 Lead ECG to balloon inflation (first device used)			
Percentage of reperfusion eligible patients who receive any reperfusion therapy (PCI or Fibrinolysis).			
Percentage of STEMI patients with a door to balloon inflation (first device used) < 90 mins (non-transfer)			
Percentage of STEMI patients with first medical contact to balloon inflation (first device used) < 90 mins (non-transfer)			
Percentage of STEMI patients with first medical contact to balloon inflation (first device used) < 90 mins (transfer)			
Percentage of STEMI patients receiving aspirin within 24 hours			
Percentage of STEMI patients on aspirin at discharge			
Percentage of STEMI patients on beta blocker at discharge			
Percentage of STEMI patients with LDL > 100 who receive statins or lipid lowering drugs			
Percentage of STEMI patients with LVSD on ACEI/ARB at discharge			
Percentage of STEMI patients that smoke with smoking cessation counseling at discharge			
Percentage of STEMI patients with a door (referring hospital)-to-balloon (first device used) < 90 mins, transfer			
Percentage of STEMI patients with a referral to cardiac rehabilitation at discharge			

Non- PCI / STEMI Referral Hospital			
Data Measure	Capture / Record?	Method	Comment
Percentage of STEMI patients with a door to first ECG time < 10 minutes			
STEMI patient time interval from ED arrival (Non-PCI Center) to ED discharge (Non-PCI Center)			
STEMI patient time interval from ED arrival (Non-PCI Center) to balloon (first device)			
Percentage of PCI eligible STEMI patients with time interval from ED arrival (Non-PCI Center) to balloon (first device) in less than 90 minutes			
In Hospital mortality of STEMI patients			
Percentage of reperfusion eligible patients who receive any reperfusion therapy (PCI or Fibrinolysis)			
Percentage of reperfusion eligible patients with door to needle time within 30 minutes			
Percentage of STEMI patients with LVSD on ACEI/ARB at discharge			
Percentage of STEMI patients that smoke with smoking cessation counseling at discharge			

System			
Proportion of STEMI patients who receive reperfusion therapy			
Proportion of patients with field diagnosis of STEMI who receive field activation of cardiac cath lab for intended 1°PCI			
Proportion of patients with field diagnosis of STEMI who do not undergo acute cath due to misdiagnosis			
Proportion of patients with field diagnosis of STEMI who do not undergo acute cath and have no cardiac marker elevation or revascularization in first 24 hrs			
Proportion of suspected cardiac patients > 35 years treated by EMS for whom a 12 Lead ECG was obtained			
Proportion of STEMI patients treated by EMS for whom a 12 Lead ECG was obtained			
Proportion of patients with presumed STEMI and EMS treated VF who are taken to the cardiac cath lab for intended primary PCI			
Survival to hospital discharge for all STEMI patients			
Survival to hospital discharge for all STEMI patients with prehospital VF			
Proportion of transferred STEMI patients with an initial door to balloon (first device used) time within 90 mins			

Notes & Additional Comments