Chest Pain / Acute Coronary Syndrome

The goal is to reduce cardiac workload and to maximize myocardial oxygen delivery by reducing anxiety, appropriately oxygenating and relieving pain.

Pre-Medical Control

MFR/EMT/SPECIALIST/PARAMEDIC
1. Follow General Pre-Hospital Care Protocol.
2. Inquire of all patients (male and female) if they have taken Viagra (sildenafil citrate) or similar erectile dysfunction medications in the last 48 hours. If yes, DO NOT ADMINISTER NITROGLYCERIN.

EMT/SPECIALIST/PARAMEDIC
3. Assist patient in the use of their own Nitroglycerin sublingual tabs (check expiration date) if available and if the patient’s systolic BP is above 120 mmHg, for a maximum of 3 doses.
4. Assist patient in the use of their own aspirin, or administer up to 324 mg / chew and swallow if no aspirin within 24 hours.

PARAMEDIC
5. Administer aspirin 324 mg (chew and swallow if no aspirin within 24 hours).
6. Obtain 12-lead EKG if available. Follow local MCA transport protocol if EKG is positive for acute ST Segment Elevation Myocardial Infarction (STEMI) and alert hospital as soon as possible.
7. Do not delay transport.

SPECIALIST/PARAMEDIC
8. Start an IV NS KVO. If the patient has a BP of less than 100 mmHg, administer a NS fluid bolus in 250 ml increments and reassess.

PARAMEDIC
9. Administer nitroglycerin 0.4 mg sublingual if BP is above 100 mmHg. Dose may be repeated at 3 to 5 minute intervals if chest pain persists and BP remains above 100 mmHg.
10. Contact Medical Control

Post-Medical Control

11. If pain persists, administer narcotic analgesic per MCA selection.

PAIN MEDICATION OPTION
(Choose One)
☐ Pre-Medical Control Order
OR
☐ Post-Medical Control Order

NARCOTIC ANALGESIC OPTIONS
(Select Options)
☐ Fentanyl 50-100 mcg IV/IO (1 mcg/kg) may repeat ½ dose every 5 minutes until maximum of 3 mcg/kg
☐ Morphine Sulfate 2-5 mg IV (0.05 mg/kg) may repeat dose every 5 minutes until maximum of 20 mg.
The goal is to reduce cardiac workload and to maximize myocardial oxygen delivery by reducing anxiety, appropriately oxygenating and relieving pain.

Follow General Pre-hospital Care Protocol

**DO NOT ADMINISTER NITROGLYCERIN**

- YES
  - Has patient used erectile dysfunction drugs within last 48 hours? (Inquire of both - male & female)

- NO
  - Assist patient in the use of their own Nitroglycerin sublingual tabs (check expiration date) if available and if the patient’s BP is above 120 mmHg, for a maximum of 3 doses.

Assist or administer aspirin 324 mg PO chewed

Obtain 12-Lead EKG (if available)

If STEMI suspected, notify receiving facility ASAP

**DO NOT DELAY TRANSPORT**
Follow local MCA Transport Protocol

Initiate IV NS KVO

- YES
  - BP greater than 100 mmHg

  - Nitroglycerin 0.4 mg SL (Repeat every 3-5 minutes as needed) If chest pain persists and blood pressure remains above 100 mmHg,

  - Contact Medical Control

  - If pain persists, administer Narcotic Analgesic per MCA selection (See box at right)

- NO
  - BP greater than 100 mmHg

  - Initiate IV NS 250 mL increments & reassess

**PAIN MEDICATION OPTION**
(Choose One)

- Pre-Medical Control Order OR
- Post-Medical Control Order

**NARCOTIC ANALGESIC OPTIONS**
(Select Options)

- Fentanyl 50-100 mcg IV/IO (1 mcg/kg) may repeat ½ dose every 5 minutes until maximum of 3 mcg/kg

- Morphine sulfate 2-5 mg IV (0.05 mg/kg) may repeat dose every 5 minutes until maximum of 20 mg