Acute Coronary Syndrome

Chest pain or tightness ?ACS

Consider clinical presentation
Nature of symptoms
History of IHD
Risk factors for IHD

If ongoing pain:
Morphine
Anti-Emetic
Oxygen if hypoxia
Nitrates

ECG within 5mins
Document in notes
Repeat if uncertain

ST Elevation
>2mm in 2 contiguous chest leads
or
>1mm in 2 limb leads

New Left Bundle Branch Block

ST Depression
Down-sloping or horizontal
and
>0.5mm in 2 contiguous leads

T-Wave Inversion
>1mm in 2 contiguous leads

No Ischaemia

reperfusion criteria met

Aspirin 300mg
Clopidogrel 600mg

Primary PCI or in rare case Thrombolysis more appropriate
See Separate Guidelines

Aspirin 300mg
Clopidogrel 300mg
Fondaparinux 2.5mg

ACS still most likely diagnosis

Aspirin 300mg
Fondaparinux 2.5mg

ACS felt to be unlikely but 3- Hour Troponin needed to exclude

Baseline Troponin if presents < 2 hours. If positive repeat at 6 hours for peak

3 hour troponin repeat ECG

If both Troponin I (TnI) levels are negative, ACS is excluded. Consider alternative diagnosis. Consider cardiology referral if pain still felt to be ischaemic.

Either troponin positive

Cardiac monitoring
Full ACS Rx
(If Not Already Given):
Aspirin 300mg
Clopidogrel 300mg
Fondaparinux 2.5mg

Repeat ECG if further pain

Cardiac chest pain team review bleep 6550 Mon to Friday. Consider Anti-anginal therapy/consider statin

Notes:
HS Troponin levels.
Negative <5
Borderline>5 but < 16 ng/l (woman) <34ng/l (men)
Positive >16ng/l(woman) >34ng/l (men)

1.Aspirin 300mg,Give even when patient is taking regular aspirin 75mg. It should be dissolved or chewed.

2.ST Elevation failing to meet reperfusion criteria
Repeat multiple ECGs. If not evolving to meet reperfusion criteria but occurring in context of history appropriate for ACS, treat as for ST depression / T-Wave inversion.

3.Indications for checking troponin
A.Suspected ACS (with appropriate history of chest pain / discomfort / tightness)
B.Ventricular arrhythmia
C.AF or other SVT *only* when accompanied by chest pain or collapse with ECG features of ischaemia (ST depression or T-Wave inversion)

NHS Borders

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