CHEST PAIN PROTOCOL

ASSESSMENT:
VITAL SIGNS: B/P___________ HR_________ RR_________ T___________ O2 sat___________ (repeat q 15min.)

- Chest pain location_______________________________________________________________
- Onset _________________________________________________________________________
- Time course_____________________________________________________________________
- Severity (Pain scale 1-10)_______________________________________________________
- Does it radiate and if so, where__________________________________________________
- Any alleviating and/or exacerbating factors________________________________________
- History of similar episodes_______________________________________________________
- Diaphoretic yes/no  Dyspnea yes/no  Dizziness yes/no  Palpitations yes/no  Nausea yes/no

TYPICAL MI SYMPTOMS:
- Diffuse chest heaviness yes/no
- Pressure or tightness that may radiate to the arm, neck or jaw

ATYPICAL MI SYMPTOMS:
- Pain at jaw
- Pain at neck
- Arm discomfort without chest pain
- Vomiting
- Fatigue
- Sharp or stabbing pain

CONSIDER:
Risk factors of diabetes, chronic kidney disease, stimtate use, recent cocaine and/or methamphetamine use.

NOTIFY PROVIDER AND AVAILABLE STAFF MEMBER

PREPARE FOR TREATMENT (Need Provider order to implement):

Obtain 12-lead EKG within 10 minutes of onset of chest pain

1. Oxygen @ 2l/min via nasal cannula if Oxygen sat <94% or unknown, or if dyspneic.
2. Aspirin 325 mg chewed and swallowed. Check allergies and no recent GI bleed.
3. Nitroglycerin (Nitro-Stat) 0.4 mg sublingual q 5 minutes prn chest pain, up to a total of 3 doses. Check BP prior to each dose. Hold for SPB < 100
   - Time of 1st NG dose___________  Time of 2nd NG dose___________  Time of 3rd NG dose___________
   - BP 5 min. after 1st dose _________BP 5 min. after 2nd dose _________BP 5 min. after 3rd dose___________
4. Licensed staff member stays with patient until EMS arrives or dismissed by NP. Non-licensed staff call 911 and direct to staff entrance door on East side of building. Non-licensed staff can read assessment from this protocol to 911.
5. Copy needed documents for EMS. Do not send originals.