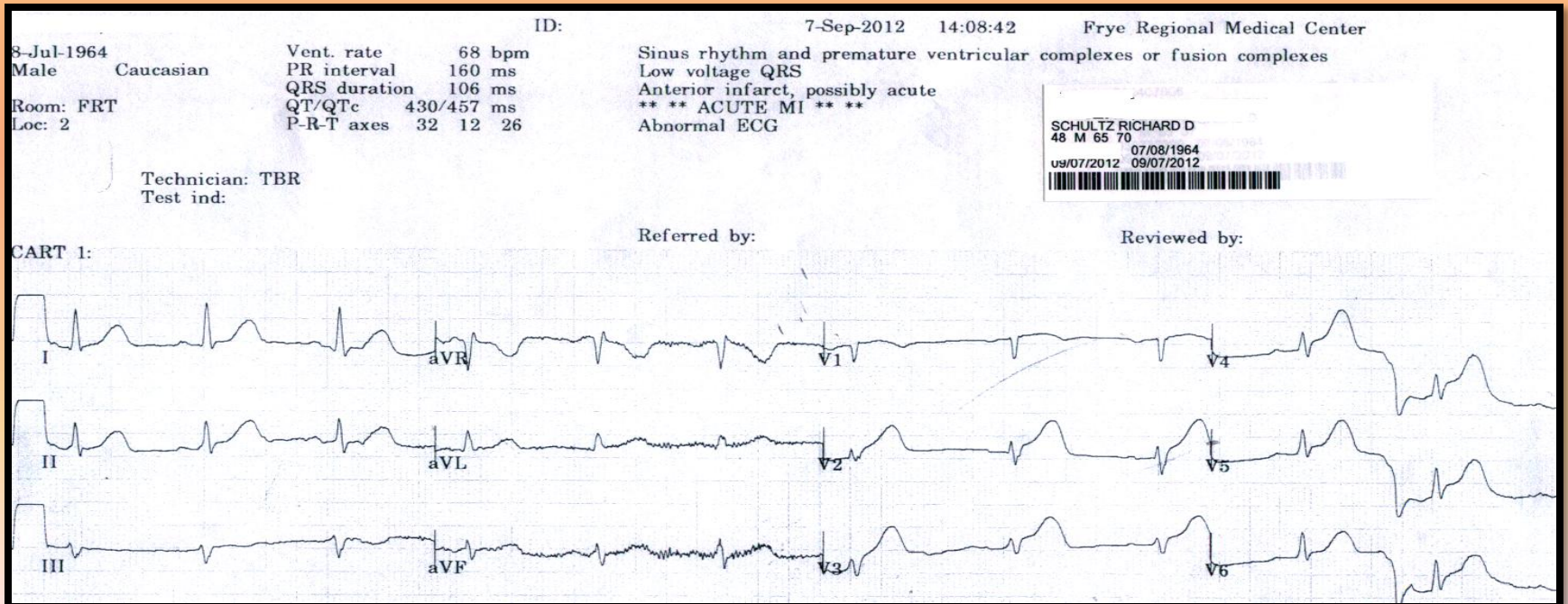


# FRMC WI 09-07-2012

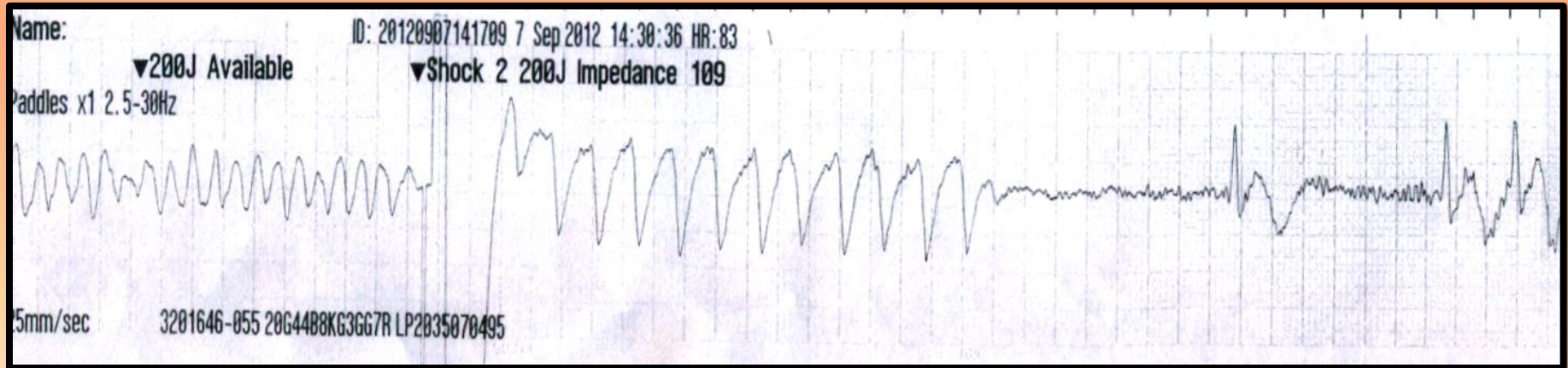
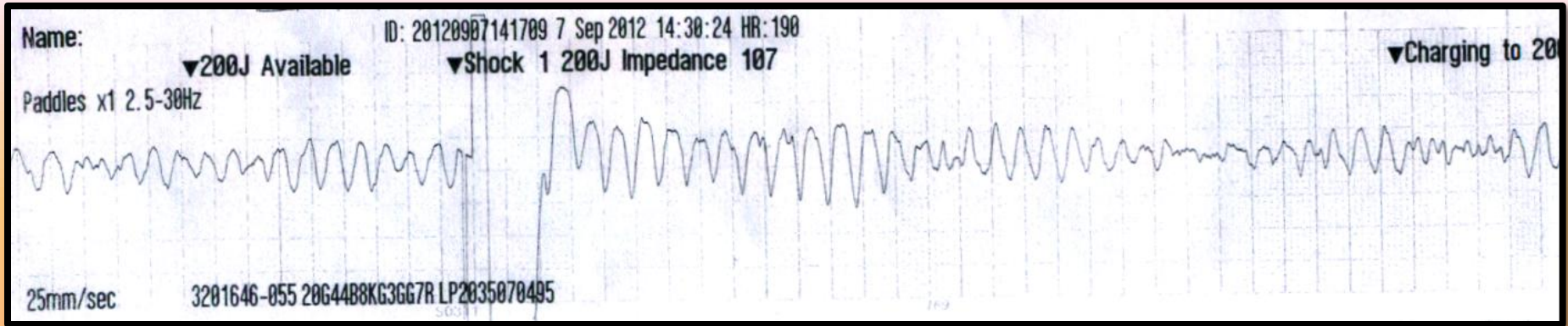
48 male with SSCP x 20 min

-Symptoms: weakness, diaphoresis, SOB  
-History: 2<sup>nd</sup> degree relative, Overweight  
-Ekg : EKG with Anterior ST elevation

Aspirin, Heparin, Hands Free Defib Pads

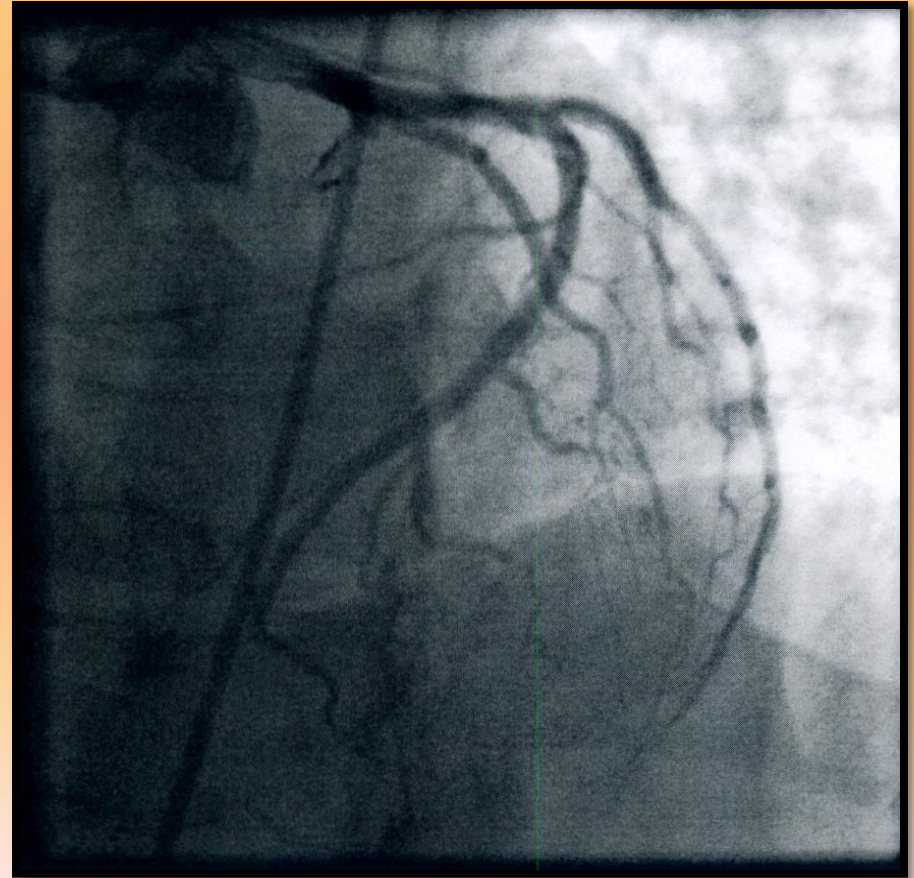
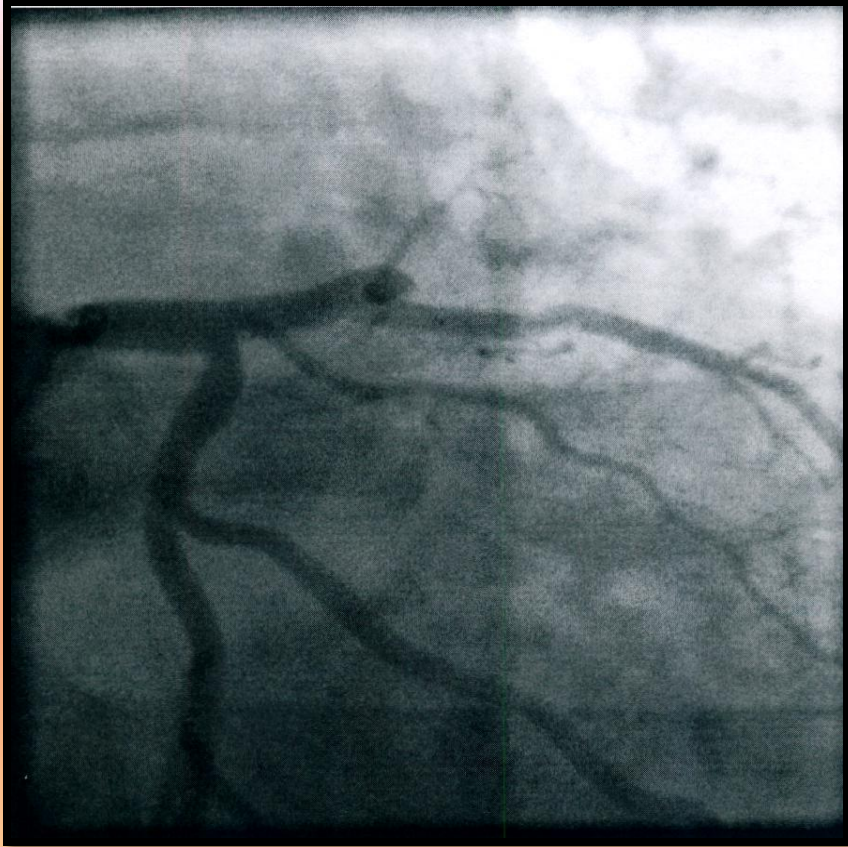


# Prior to Start of Cath

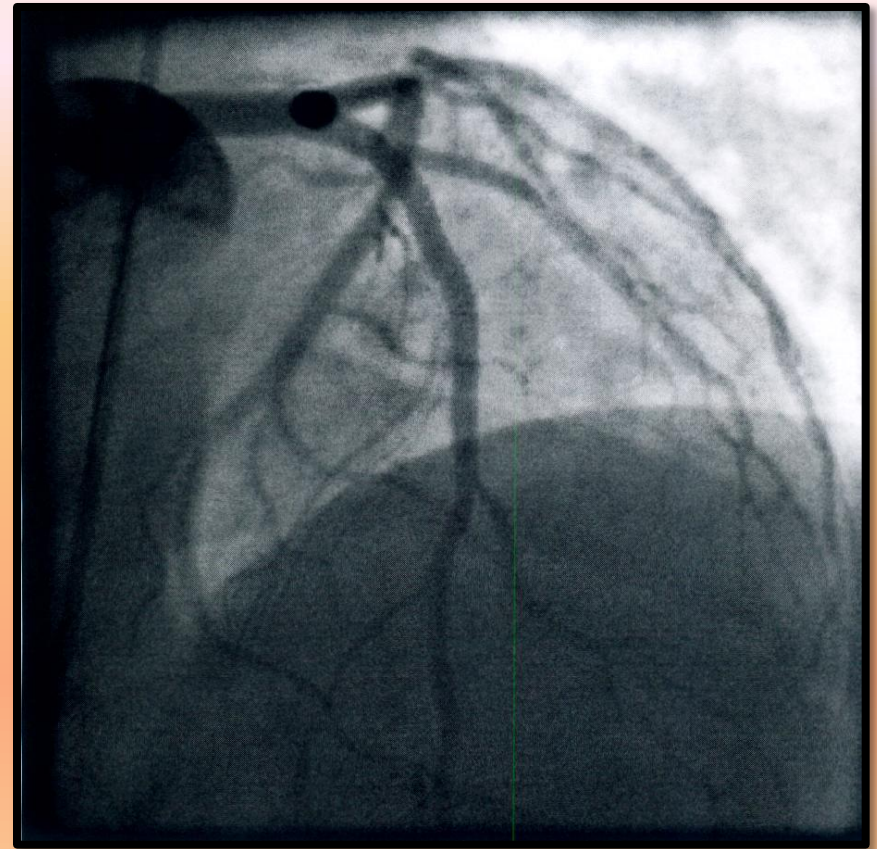




# Findings



# Final Results



**EKG: 0 min; DI/DO: 12 min**  
**Activation to Cath Lab: 10min; Cath Lab to PCI: 22 min;**  
**D2B: 37 min**

# What makes it Work???

## Team Work

- Wife recognition of Heart Attack Signs and Symptoms
- Immediate EKG on arrival
- Activation of STEMI line < 2 minutes from arrival
- Utilization of Non Interventionalist in ED
- Verbal Consent for Emergency Cardiac Cath
- ED staff and Cath Team Collaboration
  - Recognition of Critical Patient with Team Care Given
  - Immediate EKG and Lab draws
  - Assistance of ED staff with patient transport and care