

## **Guideline for transferring a STEMI patient (for PPCI or post thrombolysis for angiography) from non-PPCI to PPCI hospital**

### **Situation: Patient arrives at non PPCI hospital and is diagnosed as a STEMI**

1. Contact Ambulance control requesting urgent transfer of STEMI patient to PPCI hospital and asking
  - For the estimated **total transport time** that this will take (Ambulance to non PPCI hospital plus time to load patient plus Ambulance to PPCI hospital)
  - If there will be an advanced paramedic on the crew.(notes 2 and 3)
- 2a. If **total transport time will be within 90 minutes** then contact PPCI hospital advising that STEMI patient being transferred for PPCI.
- 2b. If **total arrival and transport time will be greater than 90 minutes** then
  - administer thrombolysis immediately; and
  - contact PPCI hospital advising that a thrombolysed STEMI patient is being transferred for early angiography (note 1)
3. The referring clinician is to consider the transport time to the receiving hospital and assess whether patient can be transferred without additional personnel. If it is anticipated that a patient has a high likelihood of developing a complication, a physician of sufficient expertise must accompany the patient if there is no advanced paramedic on the crew (notes 2,3 and 4)

### **Notes**

1. *Around 30% of thrombolysed STEMI patients either fail to reperfuse or re-occlude requiring an emergency rescue PCI.*

2: *Paramedic scope of practice for cardiac arrest is:*

- *Supraglottic airway insertion*
- *Automated external defibrillation.*

*(Paramedics cannot cannulate, administer ACLS drugs or anti-arrhythmics)*

3: *Advanced paramedics can:*

- *Intubate*
- *Manually defibrillate*
- *Provide IV and IO access*
- *Administer IV epinephrine (cardiac arrest), atropine (symptomatic bradycardia) and amiodarone (VF arrest only-NOT for tachyarrhythmias)*

4: *Advanced Paramedics will not be prioritised by Ambulance Control for such transfers. Because these are time critical transfers, the nearest available ambulance will be allocated to the transfer. 80% of the time this will be a paramedic crewed ambulance.*