

Ambulatory Care Acute Coronary Syndrome (ACS) pathway

ONLY to be used in conjunction with Trust ACS pathway

ACC Inclusion Criteria for Cardiac Chest Pain

A&E referrals

- 0 hour HsT T <14 ng/L
No new/dynamic ECG changes
- Alert
 - Mobile
 - BP >120 systolic
 - Pulse 50 - <100
 - O2sats >92% RA

GP referrals

- Pain free
No new/dynamic ECG changes
- Alert
 - Mobile
 - BP >120 systolic
 - Pulse 50 - <100
 - O2sats >92% RA

Once patient has arrived in ACC

- 1) Full set of observation and Serial 12 Lead ECGs
- 2) Repeat ECG if further chest pain or if 1st ECG abnormal
- 3) History and examination
- 4) GP referrals - routine bloods, hs-cTnT (0 hour), CXR
- 5) A&E referrals- hs-cTnT (3h or 6h from the 1st hs-cTnT at 0 h done at A&E)
- 6) If hs-cTnT >14- discuss with Senior Clinician to decide further action plan

