

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8827.09
	<u>PROGRAM DOCUMENT:</u> 12-Lead ECG	Draft Date:	02/23/05
		Effective:	11/01/16
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		Review:	05/01/18

 EMS Medical Director

 EMS Administrator

Purpose:

- A. To serve as an advanced life support skill guideline for utilizing 12-Lead Electrocardiogram (ECG).

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Indications:

- A. Discomfort/Pain of Suspected Cardiac Origin **policy, PD#8030** in stable adult patients.
- B. Symptomatic Bradycardia per Cardiac Dysrhythmias policy, PD#8024.
- C. Symptomatic Tachycardia per Cardiac Dysrhythmias policy, PD#8024.
- D. Consider for Upper Abdominal Pain per Abdominal Pain policy, PD#8007
- E. **Consider in patients forty (40) years or older with atypical signs or symptoms of acute coronary syndrome (ACS).**
Note, Atypical ACS signs and symptoms include:
 1. atypical chest pain, shortness of breath, nausea, hypotension, brady/tachydysrhythmias or syncope.
 2. High risk populations for atypical ACS signs and symptoms include: Diabetics, elderly (> 75 years of age), and women.
 3. Patients under 40 account for only 0.3% of STEMIs (AHA data) and most often have typical ACS symptoms.
- F. **If 12- Lead comes back with Acute MI refer to Discomfort/Pain Suspected Cardiac Origin policy, PD# 8030.**

Equipment:

- A. Cardiac Monitor with 12-Lead capabilities
- B. Electrodes
- C. Skin preparation equipment

Procedure:

- A. Assemble the required equipment.
- B. Explain the procedure to the patient.
- C. Place the electrodes for a standard 12-Lead ECG.
- D. Obtain 12-Lead ECG and rhythm strip.

Special Notes:

- A. The most appropriate facility for hemodynamically stable patients (SBP > 90 mmHg) who have a 12-Lead ECG consistent with an acute myocardial infarction (MI) is a facility providing interventional cardiac catheterization services. Examples of 12-Lead ECG computer interpretations reading "ACUTE MI", "ACUTE MI SUSPECTED", "ST Elevation Criteria Met" or "STEMI" are accepted as consistent with an acute myocardial infarction.
- B. Hemodynamically unstable patients (SBP < 90 mmHg) shall be transported to the time closest facility providing interventional cardiac catheterization services.
- C. Patients should not have transport unduly delayed by attempts to obtain a 12-Lead ECG.
- D. All computer interpretations shall be relayed to the receiving facility prior to arrival.
Electronically if available.
- E. Copy of 12 Lead will be left at receiving facility.

Cross Reference:

Discomfort/Pain of Suspected Cardiac Origin PD #8030
Hospital Services PD #2060
Cardiac Dysrhythmias PD #8024
Abdominal Pain PD #8007
Cardiac Origin PD# 8030