

ED OBSERVATION UNIT: CHEST PAIN PROTOCOL

NYC H+H KINGS COUNTY HOSPITAL CENTER

General Observation Guidelines apply for all ED observation patients.

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul style="list-style-type: none"> • Primary complaint of chest pain • HEART Score 4-6 	<ul style="list-style-type: none"> • High risk (HEART \geq 7) • STEMI Equivalent on EKG • Clinical impression for alternate high mortality diagnosis (trauma, PE, aortic dissection) • Elevated troponin (from Baseline)

INTERVENTIONS	OPTIONAL INTERVENTIONS
<ul style="list-style-type: none"> • Consider Cardiology consultation for provocative testing • NPO After Midnight for possible testing • Telemetry monitoring • Repeat EKG for active or worsening chest pain • Troponins trended x 2-3 measurements • Routine ECHOs as indicated • Aspirin (if not done and no contraindications) • Referral to cardiology clinic within 72 hours for higher-risk patients upon disposition 	<ul style="list-style-type: none"> • Nitroglycerin • Supplemental oxygen • Chest X-ray

DISPOSITION	
<p>Home:</p> <ul style="list-style-type: none"> • Normal or stable cardiac enzymes • Negative stress testing (if performed) • No significant EKG changes • ED attending not suspecting cardiac ischemia 	<p>Admission:</p> <ul style="list-style-type: none"> • Increasing levels of cardiac enzymes • Worsening or lack of improvement • Significant EKG changes • Significant stress test abnormality

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Reviewed by Bobak Zonnoor MD, Raymond Beyda MD, Rajesh Verma, MD

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Sources

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