

STEMI-RECEIVING CENTER REQUIREMENTS

Each STEMI-Receiving Center in Louisiana should:

- 1) Have recognized hospital champion(s) for STEMI care.
- 2) Have 24/7 Cardiac Catheterization Lab (CCL) availability within 30 minutes of notification (including interventional cardiologist present at start of the case).
- 3) Have single call pre-hospital activation of CCL by paramedic or ED Physician for those patients transported by emergency medical services.
- 4) Accept all STEMI patients regardless of bed availability (from EMS and STEMI Referral Centers).
- 5) Have on- call cardiac surgery back up or a pre-designated surgical back up site.
- 6) Meet hospital procedural volume standards as delineated by the American Heart Association and ensure annual interventional cardiologist volume as delineated by the American Heart Association. May choose an alternate pathway for procedural volumes to include:
 - a. Evaluation of low volume operators Risk Adjusted Mortality Index (RAMI) by participating in the NCDR registry or GWTG-CAD registry with local quality over-sight, or
 - b. Develop internal quality program to evaluate low volume operators and indicate quality program specifics in attestation.
- 7) Have on-going multidisciplinary team meetings to evaluate outcomes and quality improvement data for all STEMI patients. Operational issues should be reviewed, problems identified, and solutions implemented.
- 8) Provide concurrent feedback to EMS and STEMI Referral Centers (including data sharing with EMS or referral Center at the end of case, quarterly meetings to review cases, and data exchange with the EMS/STEMI Referral Center).
- 9) Participate in the LERN STEMI workgroup to contribute to the development and management of a regional STEMI System of Care plan.
- 10) Demonstrate commitment to the Emergency Department (ED) and Cardiac Catheterization Lab having adequate staff, equipment, and training to perform rapid evaluation, triage, and treatment for STEMI patients.
- 11) Demonstrate commitment to developing and/or refining ED and Cardiac Catheterization Lab transfer protocol to be in compliance with the regional STEMI systems of care plan.
- 12) Develop a plan with local prehospital providers to ensure inter-hospital transfers and fibrinolytic-ineligible patients receive highest priority response and are communicated en-route to bypass STEMI Referral Centers (where appropriate).
- 13) Participate in state-wide data collection, quality improvement efforts, and feedback to ensure optimal STEMI care is delivered in Louisiana.