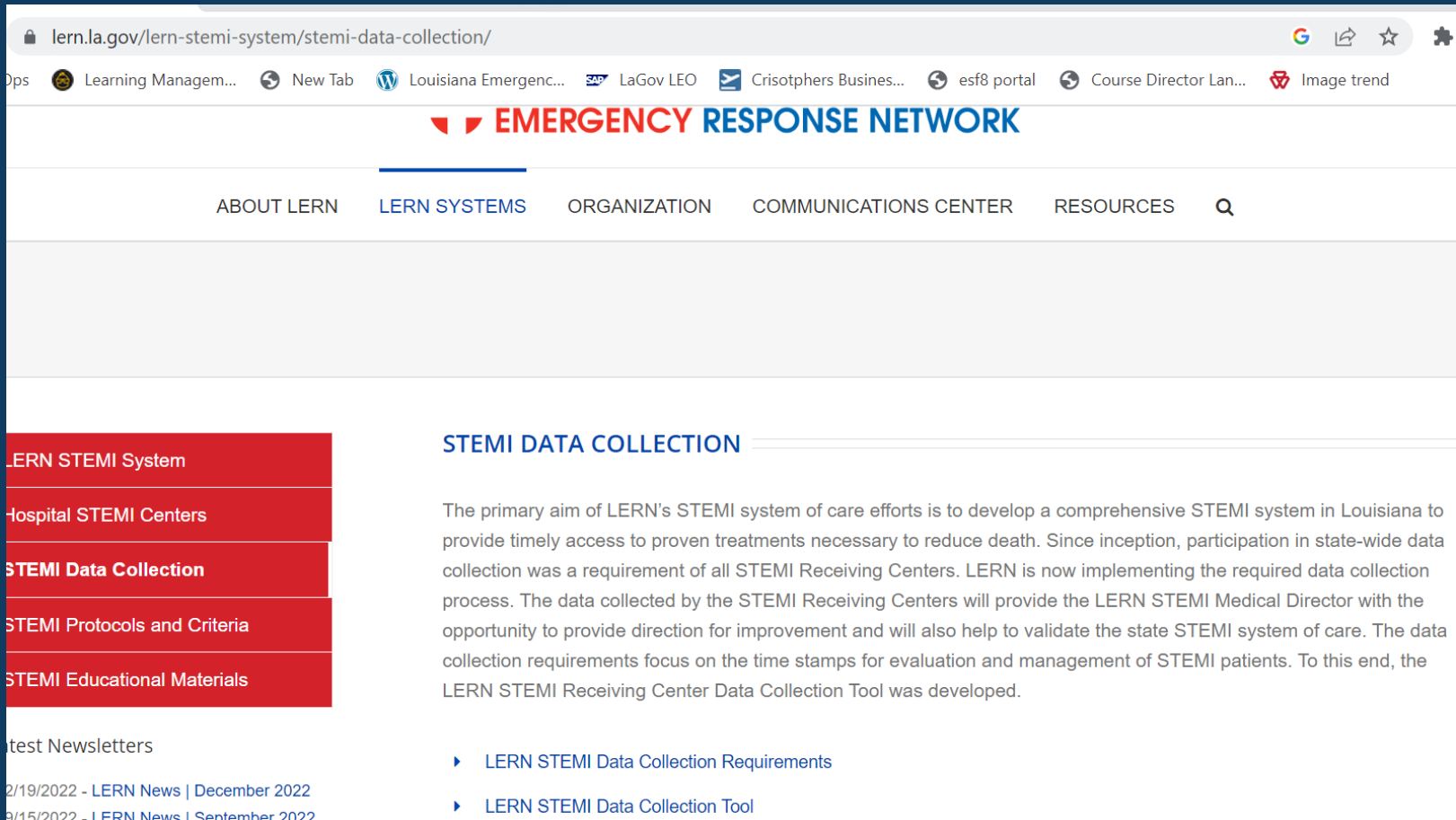


# LERN STEMI Data Form Update 2/2/23

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Tri-Regional Coordinator Regions 1, 3, and 9

# STEMI Form Updates



The screenshot shows a web browser window with the URL [lern.la.gov/lern-stemi-system/stemi-data-collection/](http://lern.la.gov/lern-stemi-system/stemi-data-collection/). The browser's address bar and tabs are visible at the top. The website header features the LERN logo and the text "EMERGENCY RESPONSE NETWORK". Below the header is a navigation menu with links: "ABOUT LERN", "LERN SYSTEMS", "ORGANIZATION", "COMMUNICATIONS CENTER", "RESOURCES", and a search icon. On the left side, there is a red sidebar with a list of links: "LERN STEMI System", "Hospital STEMI Centers", "STEMI Data Collection", "STEMI Protocols and Criteria", "STEMI Educational Materials", and "Test Newsletters". The main content area has the heading "STEMI DATA COLLECTION" and a paragraph explaining the purpose of the STEMI system of care efforts in Louisiana. Below the paragraph is a list of two links: "LERN STEMI Data Collection Requirements" and "LERN STEMI Data Collection Tool". At the bottom left, there are two dates: "2/19/2022 - LERN News | December 2022" and "9/15/2022 - LERN News | September 2022".

lern.la.gov/lern-stemi-system/stemi-data-collection/

EMERGENCY RESPONSE NETWORK

ABOUT LERN LERN SYSTEMS ORGANIZATION COMMUNICATIONS CENTER RESOURCES

LERN STEMI System

Hospital STEMI Centers

STEMI Data Collection

STEMI Protocols and Criteria

STEMI Educational Materials

Test Newsletters

2/19/2022 - LERN News | December 2022

9/15/2022 - LERN News | September 2022

## STEMI DATA COLLECTION

The primary aim of LERN's STEMI system of care efforts is to develop a comprehensive STEMI system in Louisiana to provide timely access to proven treatments necessary to reduce death. Since inception, participation in state-wide data collection was a requirement of all STEMI Receiving Centers. LERN is now implementing the required data collection process. The data collected by the STEMI Receiving Centers will provide the LERN STEMI Medical Director with the opportunity to provide direction for improvement and will also help to validate the state STEMI system of care. The data collection requirements focus on the time stamps for evaluation and management of STEMI patients. To this end, the LERN STEMI Receiving Center Data Collection Tool was developed.

- ▶ [LERN STEMI Data Collection Requirements](#)
- ▶ [LERN STEMI Data Collection Tool](#)

# STEMI Facts

[illegible]

# Reason for PCI Delay Reasons

## 17) Reason for PCI delay (Column R)

Reason for PCI delay documentation is required if Arrival at Receiving Center to PCI is >90 minutes, or if FMC (Referral Center) to PCI is >120 minutes.

Choose from drop down list or type the reason if it is not on the list.

- Patient Centered: Cardiac Arrest and/or Need for Intubation prior to PCI
- Patient Centered: Difficult Vascular Access
- Patient Centered: Difficulty Crossing the Culprit Lesion
- Patient Centered: Emergent Placement of LV Support Device prior to PCI
- Patient Centered: Patient Delays in Providing Consent for PCI
- Patient Centered: The Patient and/or Their Condition Is Obstructive to Timing of PCI
- Provider Reason: Cath Lab Team Delay
- Provider Reason: Difficult Vascular Access
- Provider Reason: Difficulty Crossing the Culprit Lesion
- Referral Center: Delay in EMS Transport
- Referral Center: Delay in Finding Acceptance
- Referral Center: Delay in STEMI Diagnosis (Obtaining or Interpreting the EKG)
- Other

If a ***patient centered*** delay reason is picked and the delay was greater than 90 minutes from Arrival to PCI, the arrival to PCI metric will be excluded from the calculations on the final feedback report.

# STEMI

## 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-site cardiac surgery back up or a pre-designated surgical back up site, and meet hospital procedural volume standards as delineated by the American Heart Association.
- 6) Ensure annual interventional cardiologist volume as delineated by the American Heart Association.
- 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) Participate in state-wide data collection, quality improvement efforts, and feedback to ensure optimal STEMI care is delivered in Louisiana.

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, and participate in state-wide data collection, quality improvement efforts, and feedback to ensure optimal STEMI care is delivered in Louisiana.

# STEMI FEEDBACK COLUMN

E	S	T	U
LOUISIANA EMERGENCY			
STEMI RECEIVING CENTER			STEMI RECEIVING CENTER
Date (mm/dd/yyyy)	Aspirin (within 24 hours of arrival)	Was Feedback provided to EMS agency &/or Referral Center?	Measure: Time from ED Arrival at STEMI Referral Facility to ED Discharge from STEMI Referral Facility in Patients Transferred for Primary PCI
			<input type="text"/>

The goal of adding this data element was to identify compliance with the feedback requirement throughout the state. Please document if and to whom (EMS and Referral Center) feedback is given.

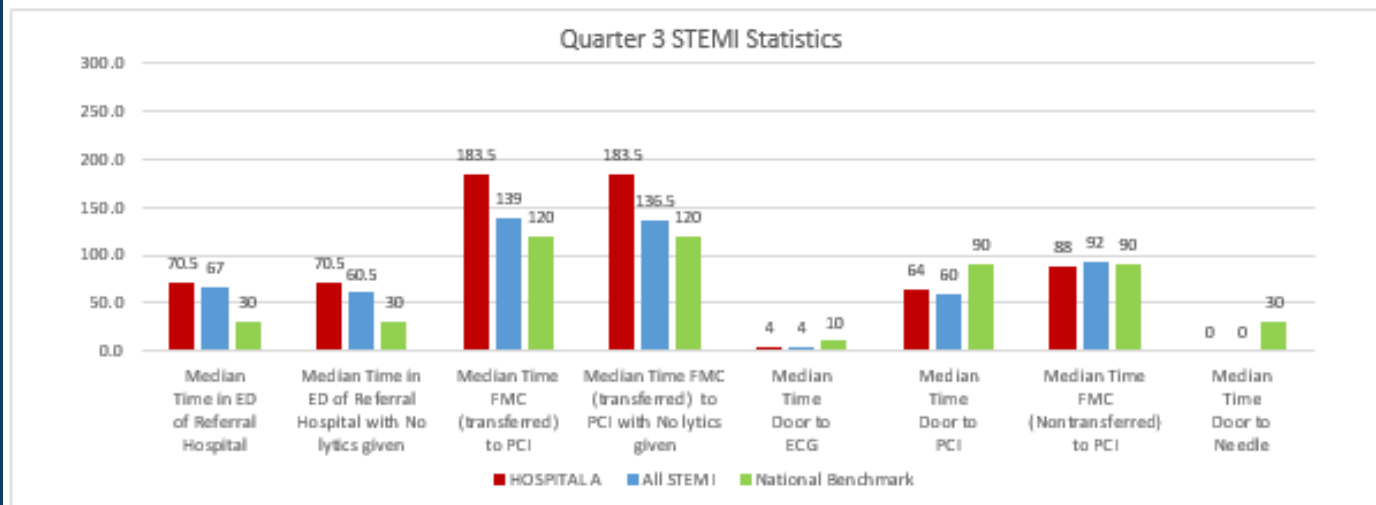
# Hospital Feedback Report



## STEMI FEEDBACK REPORT (JULY 2022-OCTOBER 2022)

### Hospital A (Blinded), Q3, 2022 STEMI Report

Quarter	Hospital	Median Time in ED of Referral Hospital	Median Time in ED of Referral Hospital with No lytics given	Median Time FMC (transferred) to PCI	Median Time FMC (transferred) to PCI with No lytics given	Median Time Door to ECG	Median Time Door to PCI	Median Time FMC (Nontransferred) to PCI	Median Time Door to Needle
2022Q3	HOSPITAL A	70.5	70.5	183.5	183.5	4	64	88	0
2022Q3	All STEMI	67	60.5	139	136.5	4	60	92	0
	National Benchmark	30	30	120	120	10	90	90	30



# Hospital Feedback Report- Referral Center Breakout

Please see the referral center breakout below to provide more center specific feedback to each referral hospital.


Received From	Number of Patients	Time in IIC of Referral Hospital				Time in IIC of Referral Hospital with lytics				Time in IIC of Referral Hospital with no lytics				Time FMC (transferred) to PCI			
		N	Median	25th	75th	N	Median	25th	75th	N	Median	25th	75th	N	Median	25th	75th
HOSPITAL 1	1	1	56	56	56	0				1	56	56	56	1	175	175	175
HOSPITAL 2	1	1	99	99	99	0				1	99	99	99	1	202	202	202
HOSPITAL 3	2	2	66.5	57.75	75.25	0				2	66.5	57.75	75.25	2	195.5	193.75	197.25
HOSPITAL 4	2	2	86	67.5	100.5	0				2	86	67.5	100.5	2	173	172.5	173.5
HOSPITAL 5	1	1	49	49	49	0				1	49	49	49	1	132	132	132
HOSPITAL 6	2	2	70.5	66.75	75.25	0				2	70.5	66.75	75.25	2	162	141	183
HOSPITAL 7	1	1	300	300	300	0				1	300	300	300	1	310	310	310

Received From	Time FMC (transferred) to PCI with lytics				Time FMC (transferred) to PCI with No lytics			
	N	Median	25th	75th	N	Median	25th	75th
HOSPITAL 1	0				1	175	175	175
HOSPITAL 2	0				1	202	202	202
HOSPITAL 3	0				2	195.5	193.75	197.25
HOSPITAL 4	0				2	173	172.5	173.5
HOSPITAL 5	0				1	132	132	132
HOSPITAL 6	0				2	162	141	183
HOSPITAL 7	0				1	310	310	310

# February Is Heart Month

• <http://www.heart.org>  
• <http://www.heart.org>

Heart Disease



Heart Disease  
Heart Disease Home

## American Heart Month

February is American Heart Month, a time when we encourage individuals, health care and public health professionals, and the general public to take small steps to reduce their risks for cardiovascular disease and the related health consequences, particularly in the workplace.


This Heart Month the Division for Heart Disease and Stroke Prevention's "Live to the Beat" campaign encourages individuals, health care and public health professionals, and the general public to take small steps to reduce their risks for cardiovascular disease and the related health consequences, particularly in the workplace.

CVD and CVD mortality are increasing in the workplace. CVD and the related health consequences, particularly in the workplace, are a leading cause of death and disability. We encourage individuals, health care and public health professionals, and the general public to take small steps to reduce their risks for cardiovascular disease and the related health consequences, particularly in the workplace.

Using this website's tools and "Live to the Beat" campaign, you can help your team support patients with hypertension.

### Tools and Resources

For Health Care Professionals



Explore change packages, best practices guides, and other tools to help your team support patients with hypertension.

American Heart Association

ANSWERS by heart

Cardiovascular Conditions

## What Are the Warning Signs of Heart Attack?



Coronary heart disease, which includes heart attack, is the No. 1 cause of death in the United States. But many of those deaths can be prevented.

About every 40 seconds someone in the U.S. will have a heart attack. Minutes matter. It's important to learn the warning signs of a heart attack so you can get help as soon as possible.

Some heart attack symptoms may start suddenly. Here are some of the warning signs:

- Chest pain or discomfort that goes on for more than a few minutes or goes away and comes back
- Discomfort or pain in one or both arms, jaw, neck, or stomach
- Shortness of breath, with or without chest discomfort
- Other symptoms such as cold sweat, nausea, dizziness, or lightheadedness
- Severe or unexplained fatigue

As with heart attack symptoms, women typically experience these symptoms as shortness of breath or fatigue.

## HEART ATTACK WARNING SIGNS

IF YOU ARE EXPERIENCING...

- Pressure, squeezing, fullness, or pain in the chest that lasts more than a few minutes, or goes away and comes back
- Pain or discomfort in one or both arms, jaw, neck, or stomach
- Shortness of breath, with or without chest discomfort
- Cold sweat, nausea, dizziness, or lightheadedness
- Severe or unexplained fatigue

## YOU MAY BE HAVING A HEART ATTACK!

Call 911 and get to a hospital IMMEDIATELY. DO NOT DRIVE YOURSELF.

**CALL 911**

Share evidence-based journal articles, and boost knowledge about hypertension in your community.

blood pressure.



LOUISIANA  
EMERGENCY  
RESPONSE  
NETWORK

EMERGENCY RESPONSE NETWORK

- Any Questions?

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