

ST-Elevation MI Orders

for use only in the Emergency Department

Draw a line through, initial and date all changes.
If generically equivalent medication is not acceptable, then write "brand necessary."

Circles: mark one and only one.
Squares: mark one, many or none.

0%

Two peripheral IVs, NS at KVO

O2 2 lpm nasal; increase as needed to keep oxygen saturation > 95%

Continuous pulse oximetry and cardiac monitor

VS Q5min x 15 min, then Q15min while in ED; and PRN

EKG

right-sided EKG

Stat portable CXR

High-Risk CCU labs; if ♀ < 50, UCG

Does EKG show inferior MI?

No order right-sided

Yes EKG →

Aspirin given prehospital or taken by patient prior to arrival?

Yes

No or unknown

True aspirin allergy?

No chewable aspirin 81 mg, 4 tabs chew and swallow

Yes or unknown

Severe hypotension risk:

If right ventricular (RV) infarction by physician reading, then do not give any nitroglycerin (NTG).

If no RV infarction, and systolic BP > 100: give NTG i spray SL Q5' x3 prn chest pain. If pain unrelieved by SL NTG and systolic BP > 100 start NTG drip at 10 mcg/min; titrate until chest pain free or systolic BP = 100.

Continue Next Page

Resident/PA/CRNP

Print Last Name:

Date:

Sign:

Time:

ED Attending physician (required):

Print Last Name:

Date:

Sign:

Time: