

ASPIRIN ADMINISTRATION IN ACS PATIENTS

OBJECTIVE	Administer aspirin to suspected ACS patients
DEFINITIONS	
% Administration	Percentage of patients assessed by EMS providers meeting criteria for aspirin administration and acute coronary syndromes (including STEMI) that receive aspirin
ASA Administration	The administration of any aspirin by any system credentialed provider including EMS Communications. It also includes patient self-administration prior to system provider arrival.
ACS	Any patient identified by the system provider as a suspected acute coronary syndrome or STEMI patient as indicated by the Clinical Impression of 1) "ACS" or 2) "STEMI". (Refer to definitions in Clinical Impressions List for ePCR)
Performance Objective	Early administration of aspirin to all patients presenting with suspected Acute Coronary Syndrome when not contraindicated
Appropriate Non-Administration	Patients with a documented allergy to aspirin [from RescueNet Allergies data field], inability to receive aspirin [from RescueNet GCS data field] (e.g. unable to swallow, unresponsive, wired jaw, vomiting) and those with aspirin administration prior to system providers arriving at the patient.
REPORTING	
Indicator Items	Total number of patients with ACS and STEMI as indicated by the clinical impression data field [from RescueNet] (refer to definition of ACS above) (Denominator, D)
	Total number of ACS and STEMI patients in which any aspirin is administered (refer to definition of ASA Administration above) as indicated by the intervention data field(s) <u>plus</u> the Appropriate Non-Administration cases [from RescueNet] (Numerator, N)
	% meeting performance objective criteria
FORMULA	$N/D \times 100 = \%$
EXCLUDED CASES	
	<ul style="list-style-type: none"> • None

CLINICAL PERFORMANCE INDICATOR

#4.5

ASPIRIN ADMINISTRATION IN ACS PATIENTS

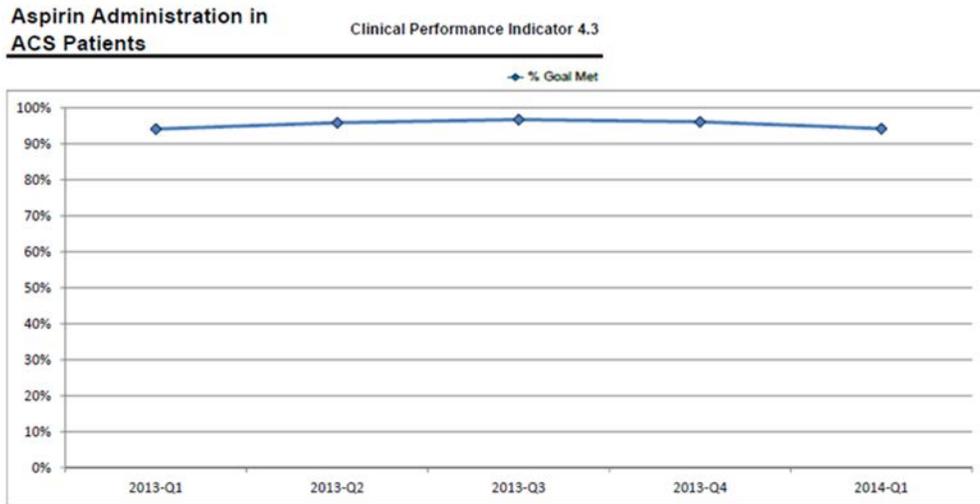
DATA SOURCE(S) COGNOS report from RescueNet and CAD

REPORTING CRITERIA

Reporting Period Quarterly; Due to OMD PI at least 2 business days prior to the EMS/OMD PI meeting at which Performance Measures will be discussed

Visual Format Line Chart (single chart); Y axis = % administration; X axis = quarter/year; Include the 5 most recent quarters of data; Include raw data in non-PDF format (e.g. Excel) (See chart layout and design example below)

Chart Legend Include total number ACS and STEMI cases for each quarter



Fiscal Year	Quarter	Count - Trips	Count - Goal Met	Percentage - Goal Met
2013	2013-Q1	439	413	94.08%
2013	2013-Q2	601	576	95.84%
2013	2013-Q3	607	587	96.71%
2013	2013-Q4	613	589	96.08%
2014	2014-Q1	498	469	94.18%

Austin-Travis County EMS

TYPE OF MEASURE Process

PERFORMANCE IMPROVEMENT Performance measures are reviewed periodically by the Agency and OMD Performance Improvement staff. Clinical performance is overseen by the System Clinical Performance Improvement Committee and its Subcommittees.

REFERENCES None

DOCUMENT APPROVAL All clinical performance measures and revisions to these measures are reviewed and approved by the System Clinical Performance Improvement Committee.