**Desired Outcome**
All patients exhibiting signs of Acute Coronary Syndrome receive Aspirin before arrival at the hospital.

**Standard**
100% of patients with no contraindications.

**Acceptable Quality Level**
Performance may not fall below 87% for more than two consecutive months or any three months in a year.

**Monitoring Method**
Run Chart updated by 10th business day at the beginning of each quarter.

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**Measure Description**

**Indicator Description**
This is the percentage of patients assessed by EMS providers that present with symptoms of Acute Coronary Syndrome (ACS) and receive aspirin (ASA).

**Question Indicator Answers**
What percentages of patients who were diagnosed with ACS received aspirin?

**Patient / Customer Need**
Research has shown that early aspirin administration is beneficial in patients with ACS.

**Type of Measure**
Process

**Objective**
All patients diagnosed with ACS receive Aspirin before arrival at the hospital.

**Data Provided By**
Clinical Performance Management

**Reporting Values**
The percentage of patients meeting ACS criteria to whom aspirin is administered, as defined in the applicable version of the *Austin-Travis County Emergency Medical System Clinical Operating Guidelines*.

**Limitations**
This measure is limited to ACS patients. Other patients for whom aspirin administration is indicated and patients who receive aspirin when not indicated are excluded from this measure.

**Notes**
None
### Measure Calculation

<table>
<thead>
<tr>
<th><strong>Formula Description</strong></th>
<th>Count of patients meeting ACS criteria who are documented as receiving aspirin as an intervention when indicated, divided by the count of all patients meeting ACS criteria. The resulting measure is expressed as a percentage.</th>
</tr>
</thead>
</table>
| **Indicator Formula**  | \[
Percentage = \frac{\text{count([ACS Patients Receiving ASA])}}{\text{count([ACS Patients])}}
\] |
| **Data Filters**       | Include only patients identified in ePCR data as meeting ACS criteria. |
| **Interval Calculation** | Not Applicable |
| **Numerator**          | **Population** Patients receiving aspirin when indicated. |
|                        | **Inclusion** All patients who meet ACS criteria. |
|                        | Patients who receive aspirin from first responders may be included in the numerator. |
|                        | **Exclusion** • Patients who receive aspirin when the intervention is not indicated.  
                        • Patients who refuse ASA  
                        • Patients receiving critical airways or unable to swallow, including obtunded patients and patients in cardiac arrest (receiving CPR).  
                        • Documented ASA allergy.  
                        • Patients who are not transported.  
                        • Patients in severe respiratory distress  
                        • Patients who do not meet ACS criteria (data entry error). |
| **Data Source**        | Clinical Performance Management audit results. |

| **Denominator**        | **Population** All patients meeting ACS criteria. |
|                        | **Inclusion** See “Population” |
|                        | **Exclusion** • Patients who receive aspirin when the intervention is not indicated.  
                        • Patients who refuse ASA  
                        • Patients receiving critical airways or unable to swallow, including obtunded patients and patients in cardiac arrest (receiving CPR).  
                        • Documented ASA allergy.  
                        • Patients who are not transported. |
• Patients in severe respiratory distress
• Patients who do not meet ACS criteria (data entry error).

**Data Source**
Clinical Performance Management audit results.

**Aggregation**
Aggregate patients based on date/time of phone pickup in Communications Center for incident.

**Stratification**
None

**Minimum Sample Size**
None

**Data Lineage**
Patients meeting ACS criteria are queried from ATCEMS ePCR data. Charts of patients who are not documented as receiving ASA are retrieved and reviewed to identify those meeting exclusion criteria.

**Reporting**

| Travis County ILA Reporting | **Medium**: Web site chart  
**Orientation**: External  
**Format**: Run chart containing quarterly data values for most recent nine quarters.  
**Update Frequency**: Quarterly  
**Data Source**: Clinical Performance Management performance report. |

**Metadata**

| Pillar / Strategic Objective Links | S1: To be an organization that strives to improve the lives of people in our community.  
S2: To have a service delivery model that best serves the needs of our community.  
S3: To be an organization that puts service before self.  
F2: To be an organization that provides value to the community.  
F3: To provide quality cost efficient service to the community.  
Development Status | Actively reporting. |
References

Interlocal Agreement Between the City of Austin and Travis County for Emergency Medical Services (Fiscal Year 2014)


Best Practices

None referenced

Definition Version Info

Version C; 2014-03-06