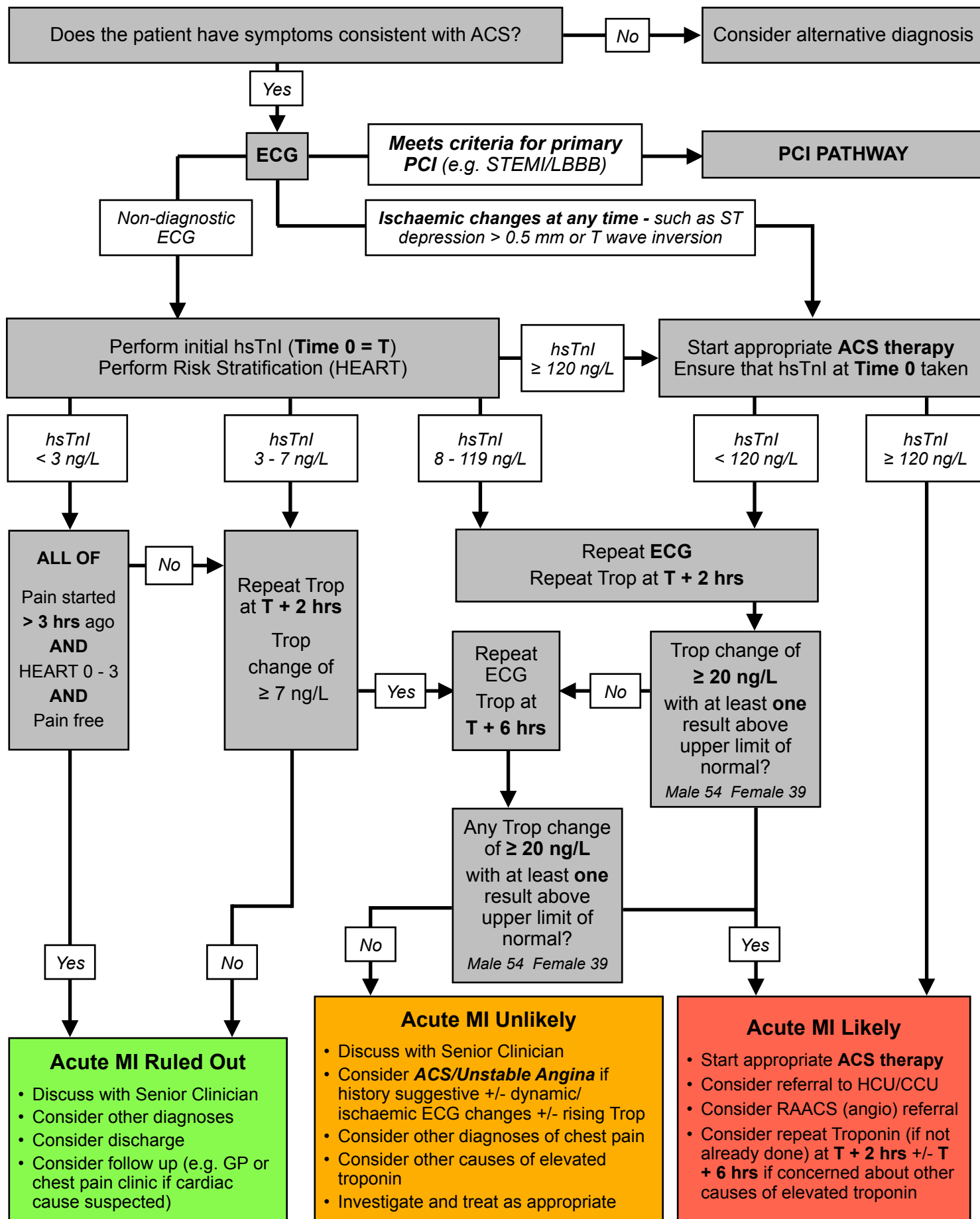


Cardiac Chest Pain Guideline



| HEART SCORE | Criteria | Points |
|--|---|--------|
| History <u>Typical Symptoms</u> <ul style="list-style-type: none"> - central/left chest pain - radiation to arms/throat - sweating/clamminess <u>Atypical Symptoms</u> <ul style="list-style-type: none"> - no chest pain, right chest pain - radiation to back - worse on inspiration/palpation | Highly suspicious (Typical symptoms only) | 2 |
| | Moderately Suspicious (Both typical and atypical symptoms) | 1 |
| | Slightly Suspicious (Atypical symptoms only) | 0 |
| ECG | New ST segment deviation | 2 |
| | Old changes/ bundle branch block/ paced rhythm | 1 |
| | Normal/ non-specific T wave changes | 0 |
| Age | > 64 years old | 2 |
| | 45 - 64 years old | 1 |
| | <45 years old | 0 |
| Risk Factors <ul style="list-style-type: none"> - Diabetes - Smoker within last 90 days - Hypertension - Hypercholestraemia - FH coronary artery disease | > 2 Risk Factors OR previous AMI/ CVA/ PVD | 2 |
| | 1-2 Risk Factors | 1 |
| | No Risk Factors | 0 |
| Troponin | Male > 102/ Female > 48 | 2 |
| | Male 34 -102/ Female 16 - 48 | 1 |
| | Male < 34/ Female < 16 | 0 |
| TOTAL | | |

0-3 points - 1.7% chance of MACE in next 6 weeks

4-6 points - 16.6% chance of MACE in next 6 weeks

7-10 points - 43.1 - 50.1% chance of MACE in next 6 weeks

**MACE = Major Adverse Cardiac Event
(Death, AMI, CABG, PCI, coronary stenosis)***

* Backus BE et al. A prospective validation of the HEART score for chest pain patients at the emergency department. *International Journal of Cardiology* 168 (2013) 2153–2158

* Six AJ et al. The HEART Score for the Assessment of Patients With Chest Pain in the Emergency Department. A Multinational Validation Study. *Crit Pathways in Cardiol* 2013;12: 121–126

| | Dose | Route | Notes |
|--------------|------------------------------|-----------------------------------|--|
| Aspirin | 300mg stat (then 75mg OD) | PO (chewed or dissolved in water) | Avoid if: - significant contra-indication (anaphylaxis, recent GI bleed) - if given prehospital (check ambulance sheets) |
| Ticagrelor | 180mg stat (then 90mg BD) | PO | Avoid if: - significant contra-indication - see CPDI229 5.2.1 - Any recent head trauma. Perform head CT first. |
| Fondaparinux | 2.5mg OD | SC | If eGFR <20ml/min then use <i>Enoxaparin 1mg/kg SC daily</i> Avoid if: - Significant contra-indication. - Already anticoagulated. - Any recent head trauma. Perform head CT first. |