

# **Standard Operating Procedure (SOP) for Electronic Transmission of ECGs from Referrers to Heart Attack Centres (HACs).**

June 2021

1. All hospitals in the region who refer potential PPCI patients to an MFT HAC need to have a dedicated device which would be held in their Emergency department (or Admissions ward if no ED). This device (iPad or similar device) should be connected to local Trust WiFi, able to run Pando and have a camera which can be used to take images of ECGs. It is expected that all ECG transmissions from the referring hospital would be made by this device.
2. HACs should have 2 similar devices for receiving referrals - 1 in CCU and 1 in the cath lab.
3. Trust portable devices should be password protected and potentially may have a sim card to minimise the risk of lack of connectivity. Pando should be installed by Hospital IT on these devices.
4. The local PPCI lead should register a new account on Pando for that hospital's ED with a generic name which identifies their site, e.g. BoltonED or WiganED. An NHS e-mail address is needed for this purpose.
5. The main administrator for the PPCI group at MFT will create the GM PPCI group on Pando and will remain in charge of adding group members; this group will include the accounts at both HACs, the ED account at referring hospitals, PPCI co-ordinators at HACs and Registrars/Fellows at the HACs. The group Administrator will update the group every February and August as a minimum to ensure membership is accurate especially with respect to registrars/fellows. Individual Health Professionals in ED/Medicine at referring hospitals and Consultant Cardiologists will not be part of this group, to conform to Information Governance principles in keeping membership of this group as small as possible. Sharing of ECGs with the HAC consultant on call can be done by the on call registrar as needed, as long as the consultant has a Pando account.
6. After completion of the PPCI checklist, the patient's ECG should be uploaded to the GM Primary PCI service group on the app Pando.

7. All ECGs sent should have patient identifiable information which should be checked by both sender and receiver. All ECGs received should be confirmed at the time of the phone call and will otherwise be assumed as not received by the sender
8. Basic clinical data such as demographic details must be entered within the app to enable standardisation of the information sent to the HAC, and also for maintenance of an audit trail.
9. The app will not be used to refer cases in isolation (i.e. without a phone call) nor will it be used to log the decision made after the phone call. HAC registrars will complete the relevant paper proforma documenting the decision made for all patients discussed with them as now.

NOTE:

- Data and usage of the system will be audited, and a questionnaire-based feedback at the end of three months to evaluate this initiative.
- The HAC PPCI co-ordinators will maintain an audit trail of referrals. For patients accepted for PPCI the new proforma and the referral ECG will be amalgamated into the patient notes at the HAC.
- For patients declined for PPCI, the HAC PPCI co-ordinator will print a copy of the referral ECG from Pando and keep this with the referral proforma completed by the registrar in a PPCI declined referrals folder (stored as per local IG rules) as happens currently. Where these patients have existing patient records at the HAC, the PPCI co-ordinator will arrange storing of this information in the patient notes or EPR.
- Patient referrals uploaded to the GM Primary Service group will be deleted from the group page by the HAC PPCI co-ordinator after 72 hours, once the information has been archived locally at the HAC as above.
- The referring hospital will be responsible for documenting their discussion with the HAC registrar as now. Each hospital will maintain their own records in line with local IG rules and link referral information to local electronic patient records (EPR).