

Clinical care standard indicators: acute coronary syndromes

Exported from METEOR (AIHW's Metadata Online Registry)

© Australian Institute of Health and Welfare 2024

This product, excluding the AIHW logo, Commonwealth Coat of Arms and any material owned by a third party or protected by a trademark, has been released under a Creative Commons BY 4.0 (CC BY 4.0) licence. Excluded material owned by third parties may include, for example, design and layout, images obtained under licence from third parties and signatures. We have made all reasonable efforts to identify and label material owned by third parties.

You may distribute, remix and build on this website's material but must attribute the AIHW as the copyright holder, in line with our attribution policy. The full terms and conditions of this licence are available at <https://creativecommons.org/licenses/by/4.0/>.

Enquiries relating to copyright should be addressed to info@aihw.gov.au.

Enquiries or comments on the METEOR metadata or download should be directed to the METEOR team at meteor@aihw.gov.au.

Clinical care standard indicators: acute coronary syndromes

Identifying and definitional attributes

Metadata item type:	Indicator Set
Indicator set type:	Other
METEOR identifier:	612027
Registration status:	Health , Standard 12/09/2016
Description:	<p>The Australian Commission on Safety and Quality in Health Care has produced the Acute coronary syndromes clinical care standard indicators to assist with local implementation of the Acute coronary syndromes clinical care standard (ACSQHC 2014). The Acute coronary syndromes clinical care standard aims to ensure that patients with an acute coronary syndrome receive optimal treatment from the onset of symptoms through to separation from hospital. This includes recognition of an acute coronary syndrome, rapid assessment, early management and early initiation of a tailored rehabilitation plan. Clinicians and health services can use the Acute coronary syndromes clinical care standard and indicators to support the delivery of high quality care.</p>

Relational attributes

Related metadata references:	<p>See also Clinical care standard indicators: antimicrobial stewardship Australian Commission on Safety and Quality in Health Care, Retired 25/01/2022 Health, Standard 12/09/2016</p> <p>See also Clinical care standard indicators: delirium Health, Standard 12/09/2016</p> <p>See also Clinical care standard indicators: heavy menstrual bleeding Health, Standard 17/10/2018</p> <p>See also Clinical care standard indicators: hip fracture Australian Commission on Safety and Quality in Health Care, Superseded 18/06/2018 Health, Standard 12/09/2016</p> <p>See also Clinical care standard indicators: hip fracture 2018 Australian Commission on Safety and Quality in Health Care, Standard 15/05/2018</p> <p>See also Clinical care standard indicators: osteoarthritis of the knee Health, Standard 02/08/2017</p>
Outcome areas linked to this Indicator set:	<p>Coronary angiography Health, Standard 12/09/2016</p> <p>Early assessment Health, Standard 12/09/2016</p> <p>Individualised care plan Health, Standard 12/09/2016</p> <p>Risk stratification Health, Standard 12/09/2016</p> <p>Timely reperfusion Health, Standard 12/09/2016</p>

**Indicators linked to this
Indicator set:**

[Acute coronary syndromes: 1a-Patients whose care is guided by a documented chest pain assessment pathway](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 2a-Proportion of ambulances equipped with 12-lead ECG](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 2b-ECG performed within 10 minutes of arrival of ambulance](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 2c-ECG performed within 10 minutes of arrival to the emergency department](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 3a-STEMI patients receiving fibrinolysis or PCI](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 3b-STEMI patients receiving fibrinolysis within 30 minutes of hospital arrival](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 3c-PCI patients with STEMI with door-to-device within 90 minutes](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 4a-NSTEACS patients with documented assessment and risk stratification](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 4b-NSTEACS patients transferred to hospital with angiography facilities](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 5a-NSTEACS patients informed of the risks and benefits of coronary angiography](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 6a-ACS patients with an individualised care plan](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 6b-Patients discharged on aspirin or dual antiplatelet therapy](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 6c-Patients discharged on lipid-lowering therapy](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 6d-Patients referred to cardiac rehabilitation or other secondary prevention program](#)

[Health](#), Standard 12/09/2016

[Acute coronary syndromes: 6e-Discharge summary provided to general practitioner or ongoing clinical provider within 48 hours of separation from hospital](#)

[Health](#), Standard 12/09/2016

Collection and usage attributes

**National reporting
arrangement:**

The Indicator specification: acute coronary syndromes clinical care standard has been developed to assist with local implementation of the Acute coronary syndromes clinical care standard (ACSQHC 2014). The indicators are intended for local use by hospitals and [Local Hospital Networks](#) (LHNs). There are no benchmarks set for any of the indicators in the set.

Hospitals using Acute coronary syndromes clinical care standard indicators can compare their results against themselves during a previous period, amongst other hospitals in the LHN, or other external hospitals with whom they have made such arrangements. Hospitals may also look to the literature for the experiences of other hospitals.

Comments: The Australian Commission on Safety and Quality in Health Care has produced the Acute coronary syndromes clinical care standard (2014) to support the delivery of appropriate care for a defined condition and is based on the best evidence available at the time of development. Health care professionals are advised to use clinical discretion and consideration of the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian when applying information contained within the Clinical care standard. Consumers should use the information in the Clinical care standard as a guide to inform discussions with their health care professional about the applicability of the Clinical care standard to their individual condition.

Source and reference attributes

Submitting organisation: Australian Commission on Safety and Quality in Health Care

Reference documents: ACSQHC (Australian Commission on Safety and Quality in Health Care) 2014. Acute coronary syndromes clinical care standard. Sydney: ACSQHC.