

Acute coronary syndromes: 1a-Patients whose care is guided by a documented chest pain assessment pathway

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Indicator 1a-Patients whose care is guided by a documented chest pain assessment pathway
METEOR identifier:	612072
Registration status:	<ul style="list-style-type: none">• Health, Standard 12/09/2016
Description:	Proportion of patients presenting with acute chest pain, or other symptoms suggestive of acute coronary syndrome (ACS) , whose care is guided by a documented chest pain assessment pathway.
Rationale:	Adherence to using and documenting the chest pain assessment pathway optimises patient outcomes in the management of ACS (Acute Coronary Syndrome Guidelines Working Group 2006).
Indicator set:	Clinical care standard indicators: acute coronary syndromes Health , Standard 12/09/2016

Collection and usage attributes

Computation description:	Both the numerator and the denominator only include cases where Hospital service —care type, code N[N] = 1 Acute care. Both the numerator and the denominator include patients with acute chest pain, or other symptoms suggestive of ACS. Presented as a percentage.
Computation:	$(\text{Numerator} \div \text{denominator}) \times 100$
Numerator:	Number of patients presenting to hospital with acute chest pain, or other symptoms suggestive of ACS, whose care is guided by a documented chest pain assessment pathway.
Denominator:	Number of patients presenting to hospital with acute chest pain or other symptoms suggestive of ACS.
Comments:	Assessment is still indicated for patients with advance care directives, on a palliative care pathway, subject to discussion with patients, family and carers.

Representational attributes

Representation class:	Percentage
Data type:	Real
Unit of measure:	Episode
Format:	N[NN]

Source and reference attributes

Reference documents:	Acute Coronary Syndrome Guidelines Working Group 2006. Guidelines for the management of acute coronary syndromes 2006. Medical Journal of Australia 184(8):S1–S30.
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