Acute coronary syndromes: 2c-ECG performed within 10 minutes of arrival to the emergency department

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Acute coronary syndromes: 2c-ECG performed within 10 minutes of arrival to the emergency department

Identifying and definitional attributes

Metadata item type:	Indicator
Indicator type:	Indicator
Short name:	Indicator 2c-ECG performed within 10 minutes of arrival to the emergency department
METEOR identifier:	613162
Registration status:	Health, Standard 12/09/2016
Description:	Proportion of patients, including patients presenting to the emergency department (ED) via ambulance, with acute chest pain or other symptoms suggestive of <u>acute</u> <u>coronary syndrome (ACS)</u> , with an electrocardiogram (ECG) performed and interpreted before or within 10 minutes of arrival to ED.
Rationale:	Early diagnosis optimises door-to-needle time and time to other interventions. The time taken to record the first ECG is a good index of quality care. The European Society of Cardiology guidelines identify that ECG should be performed within 10 minutes or less after the first medical contact (either on arrival of the patient in ED or at first contact with emergency medical services in the pre-hospital setting) and immediately interpreted by a qualified physician (Steg et al. 2012; Hamm et al. 2011).
Indicator set:	<u>Clinical care standard indicators: acute coronary syndromes</u> <u>Health</u> , Standard 12/09/2016
Outcome area:	<u>Early assessment</u> <u>Health</u> , Standard 12/09/2016

Collection and usage attributes

Computation description:	Both the numerator and the denominator include patients with acute chest pain or other symptoms suggestive of ACS.
	For hospitals collecting the <u>Acute coronary syndrome (clinical) National best</u> <u>practice data set</u> , the difference between the following data elements can provide the time within which ECG is performed:
	<u>Health service event—presentation date, DDMMYYYY</u> combined with <u>Health</u> service event—presentation time, hhmm
	and
	<u>Electrocardiogram—electrocardiogram date, DDMMYYYY</u> combined with <u>Electrocardiogram—electrocardiogram time, hhmm</u>
	Presented as a percentage.
Computation:	(Numerator ÷ denominator) x 100
Numerator:	Number of patients, including patients presenting to ED via ambulance, with acute chest pain or other symptoms suggestive of ACS, with ECG performed and interpreted before or within 10 minutes of arrival to ED.
Denominator:	Number of patients presenting to ED, including via ambulance, with acute chest pain or other symptoms suggestive of ACS.
Comments:	It is common practice for doctors and senior nursing staff to sign ECGs on review, with date and time of review.

Representational attributes

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

Source and reference attributes

Reference documents: Hamm C et al. 2011. ESC Guidelines for the management of acute coronary syndromes in patients presenting without persistent ST-segment-elevation. European Heart Journal 32:2999–3054.

Steg P et al. 2012. ESC Guidelines for the management of acute myocardial infarction in patients presenting with ST-segment-elevation. European Heart Journal 33:2569–2619.