## ED OBSERVATION UNIT: CHEST PAIN PROTOCOL

### **NYC H+H KINGS COUNTY HOSPITAL CENTER**

General Observation Guidelines apply for all ED observation patients.

INCLUSION CRITERIA	EXCLUSION CRITERIA
<ul> <li>Primary complaint of chest pain</li> <li>HEART Score 4-6</li> </ul>	<ul> <li>High risk (HEART ≥ 7)</li> <li>Clinical impression for alternate high mortality diagnosis (trauma, PE, aortic dissection)</li> </ul>

INTERVENTIONS	OPTIONAL INTERVENTIONS
<ul> <li>Telemetry monitoring</li> <li>Repeat EKG for active or worsening chest pain</li> <li>Troponins trended x 2-3 measurements</li> <li>Routine cardiology consults or inpatient stress testing is not indicated</li> <li>Routine ECHOs are not indicated</li> <li>Aspirin (if not done and no contraindications)</li> <li>Referral to cardiology clinic within 72 hours for higher risk patients</li> </ul>	<ul> <li>Nitroglycerin</li> <li>Supplemental oxygen</li> <li>Chest X-ray</li> </ul>

DISPOSITIO	V
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#### Home:

- Normal cardiac enzymes
- Negative stress testing (if performed)
- No significant EKG changes
- ED attending not suspecting cardiac ischemia

#### Admission:

- Positive cardiac enzymes
- Worsening or lack of improvement
- Significant EKG changes
- Significant stress test abnormality

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#### Sources

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