



## COHESIVE HEALTHCARE MANAGEMENT & CONSULTING

### Mangum Regional Medical Center

TITLE		POLICY
Chest Pain		DRP-003
MANUAL	EFFECTIVE DATE	REVIEW DATE
Drug Room	10-1-2020	10-1-2020
DEPARTMENT	REFERENCE	
Drug Room	<a href="https://www.heart.org">https://www.heart.org</a>	

### SCOPE

This protocol applies to adult patients at Mangum Regional Medical Center for the acute management of chest pain.

### PURPOSE

Chest pain caused by acute coronary syndromes can come on suddenly, as is the case with a heart attack. Other times, the pain can be unpredictable or get worse even with rest, both hallmark symptoms of unstable angina.

The purpose of this protocol is to assist with optimizing the work-up of chest pain at Mangum Regional Medication Center in a timely manner.

### DEFINITIONS

Acute Coronary Syndrome: medical term for when the blood supply to the heart is suddenly blocked.

### PROCEDURE

Nursing Orders:

- Cardinal monitor
- Vital signs every 15 minutes
- Pulse oximetry
- Oxygen 2L/minute per NC
- Cardiac Monitor
- Peripheral IV (Saline lock) x1
- Document patient's height and weight
- Evaluate for Pulmonary Hypertension and Erectile Dysfunction medication (e.g., Viagra<sup>®</sup>, Cialis<sup>®</sup>, and Revatio<sup>®</sup>)

Radiology and Other Procedures:

- ECG 12 Lead Panel
- XR Chest AP (1 view)
- CT Chest/Thorax with contrast to rule out PE

Labs:

- ABG
- BNP
- CBC with differential
- CK Total
- CK MB
- CMP
- CRP
- D-Dimer
- Fibrinogen
- Magnesium
- Phosphorus
- PT/INR
- PTT
- TSH
- Troponin-I
- Urinalysis

IV fluids:

- Sodium Chloride 0.9% 1000mL, 999mL/Hr Bolus
- Sodium Chloride 0.9% 1000mL, \_\_\_\_\_ mL/Hr

Pain Management:

- Morphine 2mg IV push x1
- Morphine 4mg IV push x1
- Hydromorphone 1mg IV push x1

Nitroglycerin:

- Nitroglycerin 0.4mg Sublingually q5m x3 doses for chest pain
- Nitroglycerin 2% 1" topically x1
- Nitroglycerin 25mg/250mL premix (Start at 5mcg/min and titrate by 5mcg/min every 3 minutes until chest pain is relieved or SBP less than 130)

Nitroglycerin alternative:

- Labetalol 20mg IV push every 30 minutes (Max dose: 300mg)

Anti-platelets, Anticoagulants:

- Aspirin 324mg PO x1 (administer four 81mg chewable tablets)
- Plavix<sup>®</sup> 300mg PO x1
- Lovenox<sup>®</sup> 1mg/kg subcutaneous x1 (Max dose 100mg)
- Heparin 60 units/kg IV push x1 (Not to EXCEED 5000 units)
- Heparin infusion (Start at 12 units/kg/hr – refer to Heparin protocol)
- TNKase<sup>®</sup> IV push over 5 seconds x1 (weight-based dosing – refer to dosing chart)

Anti-emetics:

- Ondansetron 4mg IV push x1
- Ondansetron 4mg ODT x1
- Promethazine 25mg IM x1
- Promethazine 50mg IM x1
- Metoclopramide 10mg IV push x1
- Pantoprazole 40mg IV push x1
- GI Cocktail PO x1

**REFERENCES**

<https://www.heart.org/en/health-topics/heart-attack/about-heart-attacks/acute-coronary-syndrome>

**ATTACHMENTS**

None.

**REVISIONS/UPDATES**

Date	Brief Description of Revision/Change