

### ASPIRIN ADMINISTRATION IN ACS PATIENTS

<b>OBJECTIVE</b>	Administer aspirin to suspected ACS patients
<b>DEFINITIONS</b>	
% Compliance	Percentage of patients assessed by system providers that meet criteria of aspirin administration and acute coronary syndromes (including STEMI)
ASA Administration	The administration of any aspirin by any system credentialed provider including EMS Communications. It also includes patient self-administration prior to system provider arrival.
ACS	Defined as any patient identified by the system provider as a suspected acute coronary syndrome patient as indicated by a Clinical Impression of “ACS” or “STEMI” or with suspected cardiac chest pain.
Performance Objective	Early aspirin administration to all patients presenting with suspected Acute Coronary Syndrome when not contraindicated
Appropriate Non-Administration	Patients with a documented allergy to aspirin, contraindication to aspirin or inability to receive aspirin (e.g. unable to swallow, unresponsive, wired jaw, vomiting) and those with aspirin administration prior to system providers arriving at the patient.
<b>REPORTING</b>	
Indicator Items	Total number of patients with ACS as indicated by the clinical impression data field (refer to definition of ACS above) (Denominator, D)  Total number of ACS patients in which any aspirin is administered (refer to definition of ASA Administration above) as indicated by an intervention data field(s) <u>plus</u> the Appropriate Non-Administration cases (Numerator, N)  % meeting performance objective criteria
<b>FORMULA</b>	$N/D \times 100 = \%$
<b>EXCLUDED CASES</b>	<ul style="list-style-type: none"><li>• None</li></ul>

# CLINICAL PERFORMANCE INDICATOR

## #4.5F

### ASPIRIN ADMINISTRATION IN ACS PATIENTS

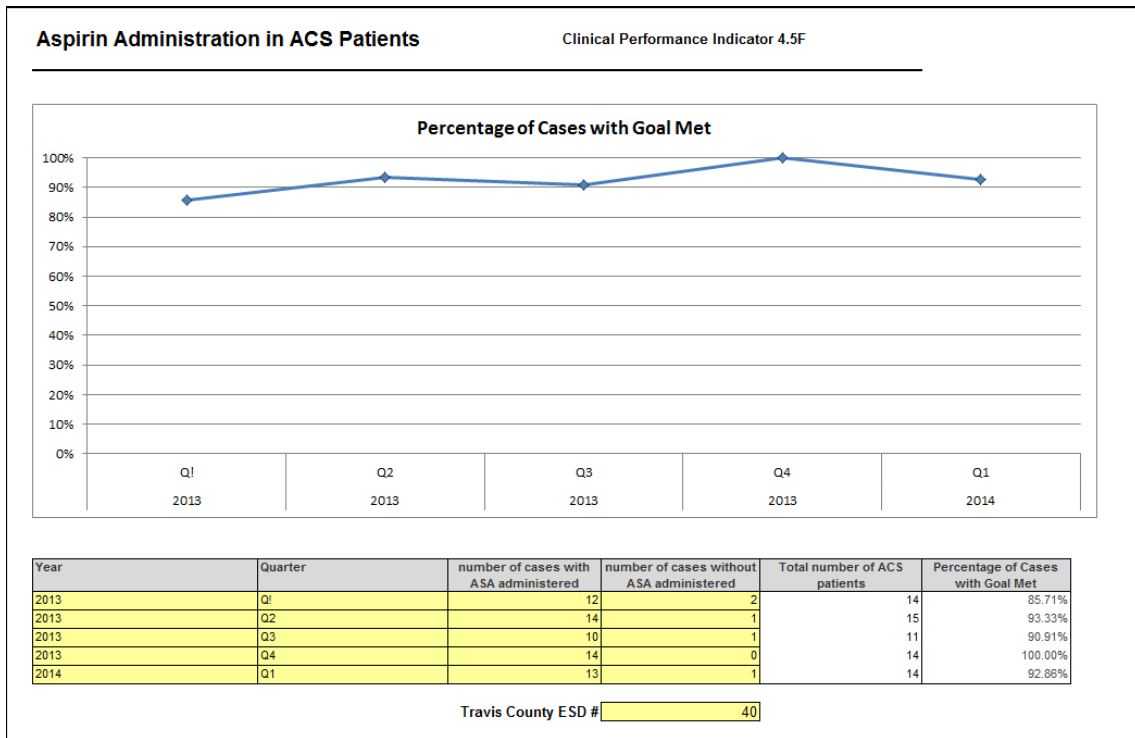
**DATA SOURCE(S)** Patient care record completed by an Agency’s credentialed provider or extracted from the Agency’s electronic data system

**REPORTING CRITERIA**

Reporting Period This measure is calculated and reported quarterly.

Visual Format Line Chart (single chart); Y axis = % Compliance; X axis = quarter/year; Include the 5 most recent quarters of data; Include spreadsheet with raw data in non-PDF format (e.g. Excel) (See chart layout and design example below)

Chart Legend Include total number ACS cases for each quarter



**TYPE OF MEASURE** Process

**PERFORMANCE IMPROVEMENT** Performance measures are reviewed periodically by the Agency and OMD Performance Improvement staff. Clinical performance is overseen by the System Clinical Performance Improvement Committee and its subcommittees.

**REFERENCES** None

**DOCUMENT APPROVAL** All clinical performance measures and revisions to these measures are reviewed and approved by the System Clinical Performance Improvement Committee.