

Chest Pain / Suspected Cardiac Event in Remote Health Centres PHC Remote Guideline

Target Audience	All Clinical Employees
Jurisdiction	Primary Health Care Remote CAHS; Primary Health Care Remote TEHS
Jurisdiction Exclusions	N/A
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Approval Authority	Chair Primary Health Care NT Wide Leaders Committee
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The attributes in the above table will be auto-filled from the PGC System. Do not update in this document.

Purpose

To provide Primary Health Care remote staff with a guideline on the tasking functions and relevant arrangements required for managing a client with chest pain / suspected cardiac event in remote health centres.

Guideline

1. General Information

Acute Coronary Syndromes (ACS) includes unstable angina, Non ST elevation myocardial infarction, ST elevation myocardial infarction and sudden death and are caused by rupture of cholesterol plaque within coronary arteries causing occlusive thrombus within the artery.

The [Heart Foundation](#) and [Cardiac Society of Australia and New Zealand](#) have developed guidelines for the management of ACS, and an [addendum](#) in 2011 specified the importance of a formal system of care to support the delivery of ACS services. *Note: non-NTG staff see [addendum](#) to purchase.*

This system of care should include:

- defined continuum of care – from presentation to long-term management
- system-based approaches to deliver timely reperfusion at a local level (Grade B)
- cardiac clinical networks established with appropriate protocols (Grade B).
- training General Practitioners (GPs) / health workers to initiate fibrinolysis (if primary percutaneous coronary intervention [PCI] services are not readily accessible)
- practitioners are supported by ready access to expert cardiology consultation (Consensus)
- routine audit integrated into all clinical ACS services (Grade B)

This document describes tasking functions and relevant arrangements required for managing a client with chest pain / suspected cardiac event in remote health centres. Clinical management, which must be in accordance with the Central Australian Rural Practitioners Association Standard Treatment Manual ([CARPA STM](#)) and the directions of the authorising Medical Practitioner, is not dealt with in this document.

The ACS Network facilitated distribution of standardised ECG carts to remote health centres that are able to transmit ECGs via NT Cardiac Epiphany System. This enables Medical Practitioners to access, review and/or refer and sign off ECG reports via the Epiphany System.

The following documents provide detailed information regarding:

- Chest Pain / Suspected Cardiac Event in Remote Health Centres Flowcharts:

Central Australia	Top End
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- [Epiphany: ECG Workflow for Health Centre Clinicians using Philips TC-50 ECG Carts](#)
- [Epiphany: ECG Workflow for Medical Practitioners \(Signing Doctors\)](#)
- [NT Cardiac: Acute Coronary Syndrome \(ACS\) Medicare Billing Information](#)
- [Training Videos:](#)
 - ~ NT Cardiac TC50
 - ~ NT Cardiac Holter monitor
- Heart Foundation [Heart Attack Warning Signs](#) webpage
Factsheet: [Heart Attack Warning Signs](#)

2. Transmission of Non-Urgent Electrocardiograph (ECG) Tracings

Clinicians using the Philips TC-50 ECG Carts are required to transmit all ECG tracings performed in the remote health centre via the NT Cardiac Epiphany System. This will promote collation of an ECG database which will facilitate comparison of previous ECG tracings in the event a client presents with chest pain or a suspected cardiac event.

Non-urgent / routine ECG tracings must be transmitted via the Epiphany System. Transmission can be completed at the time of performing the ECG or remote health centres may complete transmission of routine / non-urgent ECG tracings at least on a weekly basis. Confirmation that all ECG data has been transmitted is to be recorded on the Essential Checks Form (weekly section).

3. Contact Information

3.1 Medical Practitioner Contact per the ACS Flowchart ([CA](#) / [TE](#))

Contact	Phone Number	
TEHS Duty RMP On-Call: Royal Darwin Hospital	08 8922 8888	state call is 'URGENT'
CAHS Medical Retrieval and Consultation Centre (MRaCC) Medical Officer	1800 - 1 - MRACC 1800 167 222	'PRESS 1' for urgent consult
Cardiologist hotline:	1300 000 324	If no answer call RDH switch on 08 8922 8888

Note:

Top End: in the event the Duty RMP cannot be contacted within 10 minutes of presentation, repeat the call to the Duty RMP and state 'EMERGENCY'. If no contact, call the Cardiologist on 1300 000 324.

In the event the Cardiologist cannot be contacted, the Duty RMP will contact the CareFlight Medical Retrieval Consultant who will provide clinical management.

Central Australia: per the [CA Flowchart](#), MRaCC remains the first point of contact and will provide clinical management.

3.2 Fax

This faxmate number is only to be used in the event that NT Cardiac Epiphany System is unavailable.

CAHS MRaCC fax no:	08 8939 0148
Faxmate number for ECGs:	08 8918 8000

3.3 Support and Maintenance Contact Information

Contact	Phone Number / e-mail
NTG IT Helpdesk: <i>Support for NTG Network issues, mainly for ECG transmission from remote locations</i>	Phone: 1800 000 254 e-mail: Service.Centre@nt.gov.au
NT Cardiac: <i>Support for Epiphany access, troubleshooting and all other issues not covered by NTG IT Helpdesk and MEM</i>	e-mail: epiphany@ntcardiac.com <i>Note: e-mail is the preferred mode of communication</i> Phone: 08 8920 6250 (BH) <i>ask for the Cardiac Technician</i>
Medical Equipment Management (MEM): <i>Support for ECG equipment / carts</i>	Phone: 08 8945 6177 (BH) e-mail: Admin@mem-NT.com.au

Document Quality Assurance

	Method	Responsibility
Implementation	Document will be accessible via the Policy Guidelines Centre and Remote Health Atlas	Health Policy Guidelines Program Atlas Development Officer, Primary Health Care Central Australia Health Service
Review	Document is to be reviewed within three years, or as changes in practice occur	Atlas Development Officer, Primary Health Care Central Australia Health Service
Evaluation	Evaluation will be ongoing and informal, based on feedback.	Atlas Development Officer, Primary Health Care Central Australia Health Service

Key Associated Documents

Forms	CareFlight / Royal Flying Doctor Service Referral forms, available via the EHR
Key Legislation, By-Laws, Standards, Delegations, Aligned & Supporting Documents	Duty RMP Telephone Consultations PHC Remote TEHS Guideline Medical Officer Telephone Consultation PHC CAHS Information Sheet Emergency Transport of Clients Information Sheet: Patient Input & ECG Data Transfer to Epiphany using Philips TC-50 ECG Carts (hard copy attached to Philips TC-50 ECG Cart) Also see Section 1 for links to related documents Northern Territory (NT) Cardiac (login required)
References	As Above

Evidence Table

Reference	Method	Evidence level (I-V)	Summary of recommendation from this reference
N/A	N/A	N/A	N/A