

Chest pain

Fully undress, perform observations, apply gown and wristband
Check Allergies and Anticoagulant Medications

ASSESSMENT

- Perform full A-E assessment (including BM)
- Perform ECG (within 20mins) and get it reviewed by Dr

Red Flags

- EWS ≥ 4
- Scoring for sepsis
- Collapse
- Possible cardiac chest pain
- Grey / sweaty / pale

No

Yes – category 2

Pain free EWS < 3 & mobilising/ wheelchair

Move to cubicle
Dr/ANP review

Yes

Move to Main Waiting Room order bloods and ECG on EPR

No

INVESTIGATIONS

- Cannulate and take VBG if any red flag or EWS ≥ 3
- TROPI, FBC, UE, BM, (INR if warfarinised, Coag if NO Anticoagulation)
- Administer prescribed medications / give PGD

PLAN

- Explain process to patient/relative
- Apply nursing orders e.g. repeat ECG
- Complete accountability handover to Majors Staff and NIC



Guidelines For Use of Troponin I Measurement

Troponin I measurement **indicated in** the following cases

- Chest pain or tightness likely to be due to acute myocardial ischaemia
- New ischaemic changes on ECG (ST depression or definite T inversion)
- Diabetic patients with acute autonomic symptoms (sweating, nausea)
- Ventricular arrhythmias (not ectopics/bigeminy)
- Atrial arrhythmias with marked ST changes
- New onset complete heart block

Troponin I measurement **not indicated**

- ST elevation MI
- Pleuritic chest pain
- Atrial fibrillation without chest pain or ST changes
- Collapse with normal ECG
- Heart failure
- COPD

Interpretation of results

Troponin I <4 Negative

Troponin I 4-5 Intermediate consider repeat if clinically indicated

Troponin I >5 Positive.

“SOCRATES” Pain Assessment

S

Site

Where is the pain? (left side, right side or central)

O

Onset

When did the pain start

C

Characteristics

What is the pain like, crushing, sharp, persistent or intermittent

R

Radiation

Does the pain radiate anywhere else (Arms, jaw, back)

A

Associated symptoms

Are they short of breath, clammy or have nausea

T

Time/duration

What time did the pain start and how long did it last

E

Exacerbating/relieving factors

What makes it worse? What makes it better?

S

Severity

Whats the pain score? Was there a time when it was more sever?