

	COUNTY OF SACRAMENTO EMERGENCY MEDICAL SERVICES AGENCY	Document #	8827.11
	<u>PROGRAM DOCUMENT:</u> 12-Lead ECG	Initial Date:	02/23/05
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 Signature on File
 EMS Medical Director

 Signature on File
 EMS Administrator

Purpose:

- A. To serve as an advanced life support skill guideline for utilizing 12-Lead Electrocardiogram (ECG).

Authority:

- A. California Health and Safety Code, Division 2.5
- B. California Code of Regulations, Title 22, Division 9

Indications:

- A. Discomfort/Pain of Suspected Cardiac Origin policy, PD#8030 in stable adult patients.
- B. Consider obtaining 12-Lead ECG for patients over forty (40) years of age, with the following symptoms:
 - Symptomatic Bradycardia per Cardiac Dysrhythmias policy PD #8024
 - Symtomatic Tachycardia per Cardiac Dysrhythmias policy, PD #8024
 - Diabetic
- C. Patients over seventy-five (75) years with atypical* signs or symptoms of acute coronary syndrome (ACS).

**Atypical ACS signs and symptoms include: Atypical chest pain, shortness of breath, nausea, hypotension, brady/tachydysrhythmias or syncope.*

Special Considerations:

- A. Patients should not have transport unduly delayed by attempts to obtain a 12-Lead ECG.
- B. Obtaining 1 high quality EKG as soon as possible is important to patient care and accurate diagnosis.
- C. Repeat EKGs can be performed if there is a change in the patient's clinical presentation, but otherwise, prehospital serial EKGs are not indicated due to the high instance of false alerts.
- D. All 12-lead ECGs consistent with an acute STEMI, shall be transmitted to the STEMI receiving facility. If the 12 lead is not transmitted, the reason must be documented in the ePCR.
- E. A copy of all 12-Leads obtained during prehospital care, shall be delivered to the receiving facility with the patient.
- F. 12-Lead ECGs may be transmitted to an ALS Base Hospital when requesting a medical consult for interpretation.
- G. 12 Lead ECG computer interpretations reading "Acute MI", "Acute MI Suspected", "ST Elevation Criteria Met", or "STEMI" are accepted as consistent with an acute myocardial infarction.

Cross Reference: PD# 8030 - Discomfort/Pain of Suspected Cardiac Origin
PD# 2060 - Hospital Services
PD# 8024 - Cardiac Dysrhythmias
PD# 8007 - Abdominal Pain