



## CARDIOVASCULAR ST ELEVATION MYOCARDIAL INFARCTION (STEMI) RECEIVING CENTERS (SRC)

### PURPOSE

A Cardiovascular STEMI SRC will be the preferred destination for patients who access the 9-1-1 system meeting defined criteria and who show evidence of a STEMI on a 12-Lead Electrocardiogram (ECG).

### AUTHORITY

Health & Safety Code, Division 2.5, Chapter 2, §§ 1797.67, 1797.88  
Health & Safety Code, Division 2.5, Chapter 6, Article 1, § 1798.102  
Health & Safety Code, Division 2.5, Chapter 6, Article 2, § 1798.150  
Health & Safety Code, Division 2.5, Chapter 6, Article 3, §§ 1798.170, 1798.172  
California Code of Regulations, Title 13, § 1105 (c)  
California Code of Regulations, Title 22, Division 9, Chapter 4, § 100169

### DEFINITIONS

**STEMI:** ST Elevation Myocardial Infarction

**PCI:** Percutaneous Coronary Intervention

**Cardiovascular STEMI Receiving Centers (SRC):** Yolo County Emergency Medical Services Agency (YEMSA) designated facilities that have emergency interventional cardiac catheterization capabilities.

**STEMI Referring Centers:** Facilities that do not have emergency interventional cardiac catheterization capabilities.

### POLICY

- I. The following requirements must be met for a hospital to be designated as a Cardiovascular STEMI Receiving Center by YEMSA:
  - A. Be licensed by the California Department of Public Health Services as a general acute care hospital.
  - B. Have a special permit for Basic or Comprehensive Emergency Medical Service pursuant to the provisions of the California Code of Regulations, Title 22, Division 5.
  - C. Be accredited by a Centers for Medicare and Medicaid Services approved deeming authority.
  - D. Licensure as a Cardiac Catheterization Laboratory.
  - E. Intra-aortic balloon pump capability.
  - F. Cardiovascular surgical services permit:
    1. This requirement may be waived by the Emergency Medical Service (EMS) Agency Medical Director when appropriate for patient or system needs. The Medical Director will evaluate conformance with existing American



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College of Cardiology (ACC)/American Heart Association (AHA) or other existing professional guidelines for standards.

- G. Communication system for notification of incoming STEMI patients, available twenty-four (24) hours per day, seven (7) days per week including a dedicated 12-Lead ECG receiving station and an in-house paging system.
- H. Provide Continuing Education (CE) opportunities, minimum of four (4) hours per year, for EMS personnel in areas of 12-Lead ECG acquisition and interpretation, as well as assessment and management of STEMI patients.
- I. Provide public education about STEMI warning signs and importance of early utilization the 9-1-1 system.

### STAFFING REQUIREMENTS

- I. The hospital will have the following positions designated and filled prior to becoming a SRC:
  - A. Medical Directors
    - 1. The hospital shall designate two (2) Physicians as co-directors of its SRC program. One (1) Physician shall be a Board Certified Interventional Cardiologist with active PCI privileges. The co-director shall be a Board Certified Emergency Medicine Physician with active privileges to practice in the Emergency Department (ED).
  - B. Nursing Director
    - 1. The hospital shall designate two (2) SRC nursing co-directors. One (1) Nursing Director shall be a Registered Nurse (RN) trained or certified in Critical Care Nursing and affiliated with the Cardiac Catheterization Laboratory. The co-director shall be an RN trained or certified in Critical Care Nursing and affiliated with the ED.
  - C. On-Call Physician Consultants and Staff
    - 1. A daily roster of the following on-call Physician consultants and staff must be maintained:
      - a. Cardiologist with PCI privileges.
      - b. Cardiovascular Surgeon, if cardiovascular surgical services are offered.
        - i. If cardiovascular surgical services are not available on site, the facility must have a rapid transfer agreement in place with a facility that provides this service. This agreement must be on file with YEMSA. This agreement must include the requirement that the cardiac surgical hospital cannot “refuse” transfer based on limitation of resources (e.g. lack of available beds, or staff to care for the patient) for true emergent patients. Additionally, the facility must have a rapid transport agreement with a YEMSA approved transport provider agency. The expectation will be that the patient will arrive at the cardiac surgical hospital within one (1) hour of the decision to operate, in emergency cases.
      - c. Cardiac Catheterization Laboratory team.
      - d. Intra-aortic balloon pump capabilities twenty-four/seven (24/7).



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### INTERNAL HOSPITAL POLICIES

- I. The hospital shall develop internal policies for the following situations:
  - A. Fibrinolytic therapy protocol to be used only in unforeseen circumstances when PCI for a STEMI patient is not possible.
  - B. Diversion of STEMI patients **only** during times of an incapacitating internal disaster. A written notification describing such events must be submitted to YEMSA within twenty-four (24) hours of occurrence.
  - C. Notification shall be made to YEMSA at least twenty-four (24) hours prior to any planned event resulting in the cardiac cath lab being unavailable.
  - D. Prompt acceptance of appropriate STEMI patients from other STEMI referral centers that do not have PCI capability.

### COMPLIANCE

- I. YEMSA designated SRC's shall comply with all data collection, continuous quality improvement and performance standards as defined in individual SRC facility contracts. These requirements will be the same for each SRC.

### DESIGNATION

- I. The Cardiovascular STEMI Receiving Center applicant shall be designated after satisfactory review of written documentation and an initial site survey by YEMSA or its designees and completion of a contract between the hospital and YEMSA.
- II. Initial designation as a SRC shall be set forth in the contract. Thereafter, re-designation shall occur per the contract, contingent upon satisfactory review.
- III. Failure to comply with the criteria and performance standards outlined in this policy and individual SRC facility contracts may result in probation, suspension or rescission of SRC designation. Compliance will be solely determined by YEMSA.