

Cardiac STEMI (ALS) Skills Documentation Form

Candidate (Print):	Date:	
Examiner (Instructor Name Printed):		
Examiner Signature:		
Note: Examiner will use a full scale simulator for this case to reflect a (8/10) with a pulse of 92, BP 88/55 (MAP 66 mmHg), SpO2 90% lunch when the pain came on, approximately 20 minutes ago. Pa time. The patient is on Lipitor daily and takes daily vitamin table	%, EtCO2 45 mmHg, BGL 490. Patient can respond with one-word s	atient was sea
PASS FAIL		
Task	Correct	Incorrect
Identifies patient with assumed cardiac chest pain and sets monitor for	r vitals every 2 minutes	
Ensures patient is oxygenated with a goal of greater than 94% SpO2		
Ensures 12 lead ECG is obtained an interpreted NOTE: PROCTOR STATES 12 lead shows ST elevation of greater t AVL, and AVF	han 5mm in Lead 3,	
Establishes large bore vascular access (16, 14, or 12g) above the level	of the diaphragm	
Assured that high SID fluid is available to immediately bolus patient i mmHg	s MAP is below 65	
Administers Aspirin 300-325 mg orally with instructions to chew table	ets	
Activates Direct to Cardiac Catheterization Lab Process		
Package and Begin Emergent Patient Transport		
Facilitate removal of patients clothing and place under sheet or in patients	ent gown	
Considers 5000 units Unfractionated Heparin IVP		
Marks pulses		
Consider groin preparation		
Provide SRAP turnover to amergency department or eath lab staff		

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Critical Failure Criteria

Failure to establish oxygenation and vascular access for the patient	
Failure to administer and consider medications	
Failure to identify STEMI	
Failure to manage the patient as a competent provider	
Failure to assure all portions of the checklist above are provided for during case	
Exhibits unacceptable affect with patient or other personnel	
Uses or orders a dangerous or inappropriate intervention	

NOTE: You must factually document any "incorrect" or critical failure criteria on the bottom or back of this form.