

Improved Veteran Outcomes Diagnosed with Myocardial Infarction

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PURPOSE

- Perform chart audits on every patient within the inpatient hospital with the following diagnosis
 - ST-elevation myocardial infarction
 - Non-ST elevated myocardial infarction
- Identify key areas of improvement based off reports
- Provide evidence-based care in accordance with the American Heart Association Guidelines for Coronary Artery Disease (CAD)

BACKGROUND

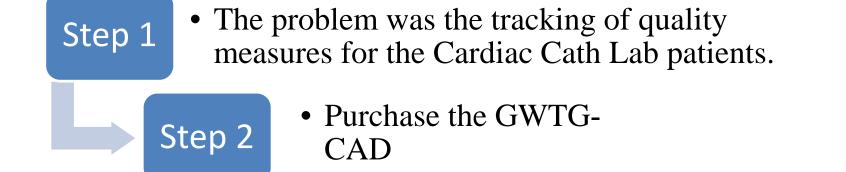
- Kentucky's leading cause of death in 2017 was heart disease (CDC/National Center for Health Statistics, 2018)
- Kentucky is ranked 9th for Heart Disease in the United States (CDC/National Center for Health Statistics, 2018)
- Kentucky's veteran population is approximately 295,390 with most veterans being sixty-five years of age or older (National Center for Veterans Analysis and Statistic, 2018)
- This facility has the capability to treat cardiac emergencies with an Emergency Department and Cardiac Catheterization Lab with 24:7 coverage.

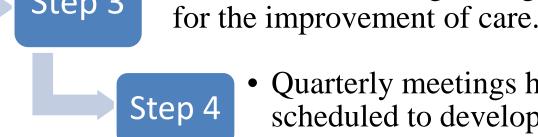
METHODS

- Inclussion criteria per AHA includes patients that are eighteen years and older with a confirmed diagnosis of NSTEMI and/or STEMI with signs and symptoms of chest tightness, shortness of breath, and/or chest pain (American Heart Association, 2021)
- Patients meeting the criteria were entered into the GWTG-CAD database to map outcomes
- Key stakeholder quarterly meetings occurred to identify improvement and adapt change strategies.

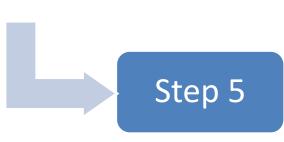
FRAMEWORK

Motivation for change is high





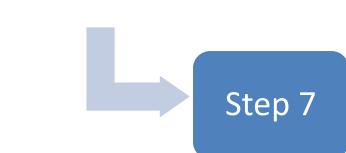
Quarterly meetings have been scheduled to develop process improvement based on data



 Educate the Emergency Department staff, Cardiology fellows, and Cardiac Cath Lab staff on expectations and implementation of change measures.



 Maintain change by having quarterly meetings to review progress.

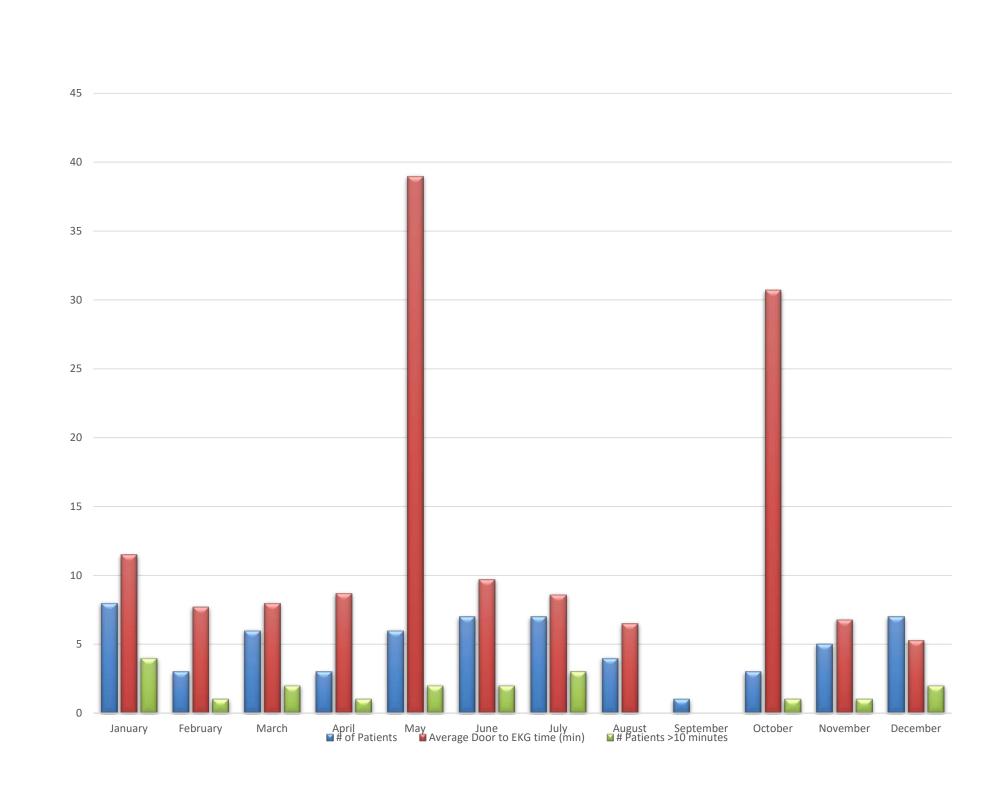


• Discontinue subscription with the AHA after treatment is consistent

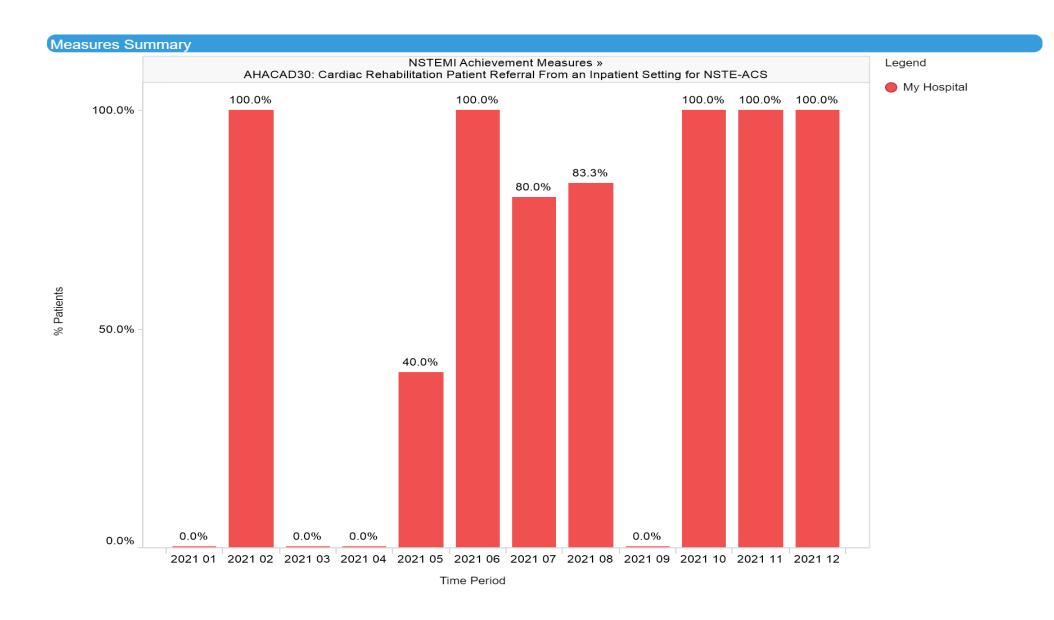
OUTCOMES

- Cardiac Rehabilitation Referral from an inpatient setting
- ACEI/ARB at Discharge (LVEF<40%)
- Left Ventricular Systolic Function Evaluated
- Smoking Cessation Counseling
- Dual Antiplatelet Therapy on Discharge (DAPT)
- ECG within 10 minutes of arrival





Cardiac Rehabilitation Referrals



Cardiac Rehab referrals hit 100% for Quarter 4 earning this facility the Bronze NSTEMI award from the American Heart Association!

CONCLUSIONS

- The areas of improvement are ECG within 10 minutes of arrival and ordering cardiac rehabilitation from the inpatient setting.
- Quarterly meetings took place among key stakeholders to discuss this quality improvement project.
- Education of cardiology fellows, Emergency Department clerks and nurses took place.
- This facility met the hospital recognition criteria for the bronze award in Mission: Lifeline NSTEMI by achieving a score of 85% or greater for 90 consecutive days.

RELEVANCE to NURSING

- Nurses can improve outcomes through collaboration with physicians and across units to achieve best cardiac patient care.
- Nursing leaders promote evidence-based practice application to improve patient outcomes.
- Nurses are the driving force of implementing quality measures.

