STEMI COORDINATOR CASE STUDY
CHI ST. ALEXIUS HEALTH, BISMARCK

Joan Reis RN

SECOND STEMI AT AGE 47

FINANCIAL DISCLOSURE:
No relevant financial relationship exists

Case Study

- Male- 47 years
- PMH: Hypertension
  Dyslipidemia
  STEMI in 2009 with 2 DES in the mid LAD, associated with V-tach and V-fib
  Myositis of lower extremities
  Former smoker
  Family hx: father CABG at age 60, mother MI age not documented
- Chest pain started 30 minutes prior to arrival

First Medical Contact

- 1024- Arrived to ER in private vehicle

  Patient lethargic, pale, diaphoretic crushing chest pressure 8 out of 10
- 1030- EKG completed. ST elevation in leads V3-V6
- 1031- Code STEMI activated
- 1033- ASA given
- 1033- Heparin given

CHI (7)
St. Alexius Bismarck (01)
Emergency Trauma Ctr (06)

HR	72	. Sinus rhythm
RR	832	. Anterolateral infarct, acute (LAD)
PR	164	
QRSD	85	
QT	426	
QTc	467	
-- AXIS --		
P	55	
QRS	-11	
T	9	

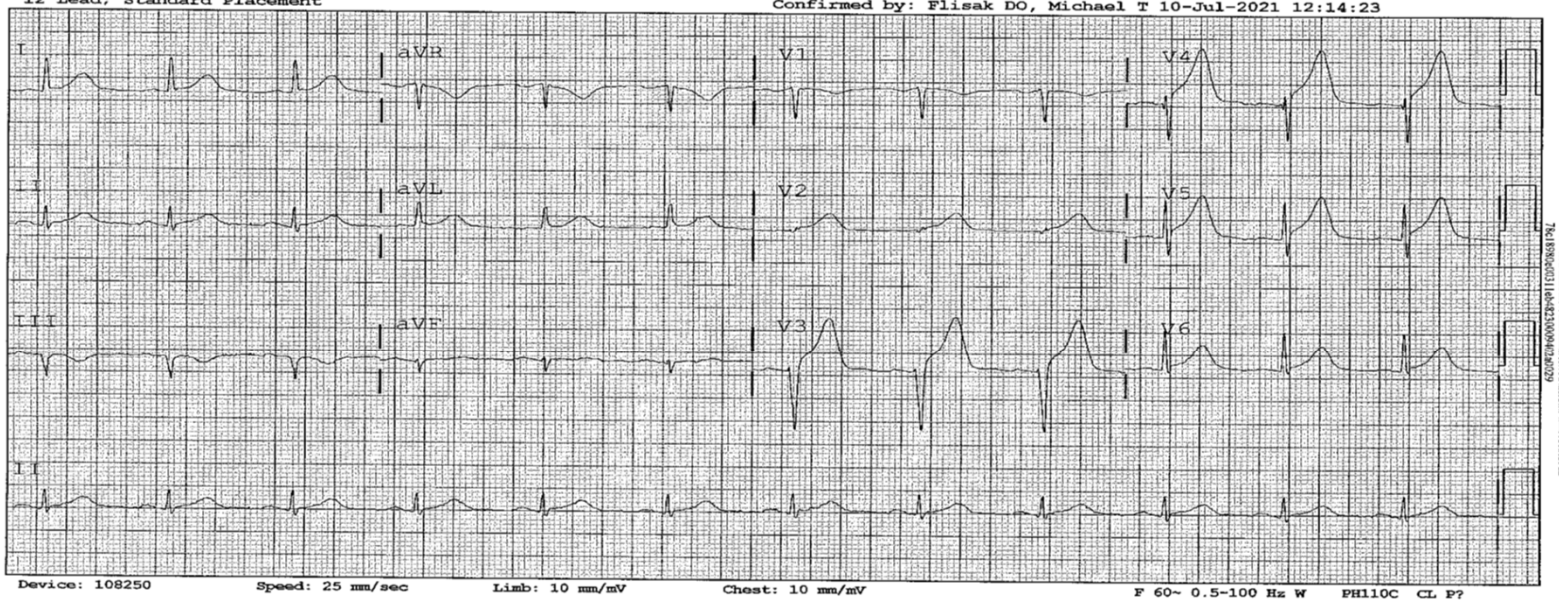
Room: 3403

Primary MD: HOYT,JOHN

Account #:
Order #:
Enc ID:
Reason: Chest pain, unspecif>

- ABNORMAL ECG -

Previous Study:26-Jan-2014 11:16:03 - Normal Confirmed
Requested By: DESMIDT,JEFFREY E
12 Lead; Standard Placement
Confirmed by: Flisak DO, Michael T 10-Jul-2021 12:14:23



Device: 108250 Speed: 25 mm/sec Limb: 10 mm/mV Chest: 10 mm/mV F 60~ 0.5-100 Hz W PH110C CL P?

Arrival to Cath Lab

- 1045- Arrived in Cath Lab
- NS infusing, O2 2L/NC, alert orientated x 4, chest pain 9/10, AP pads intact
- Monitors applied
- 1053- Access achieved
- Coronary arteriograms:
    - Left main no angiographic stenosis
    - Left Anterior Descending- 100% thrombotic occlusion of mid LAD stents with TIMI 0 flow at baseline
    - Left Circumflex- no significant stenosis
    - Right coronary artery- no significant stenosis
- 1057- Patient in V-fib shock at 150 Joules, normal sinus rhythm
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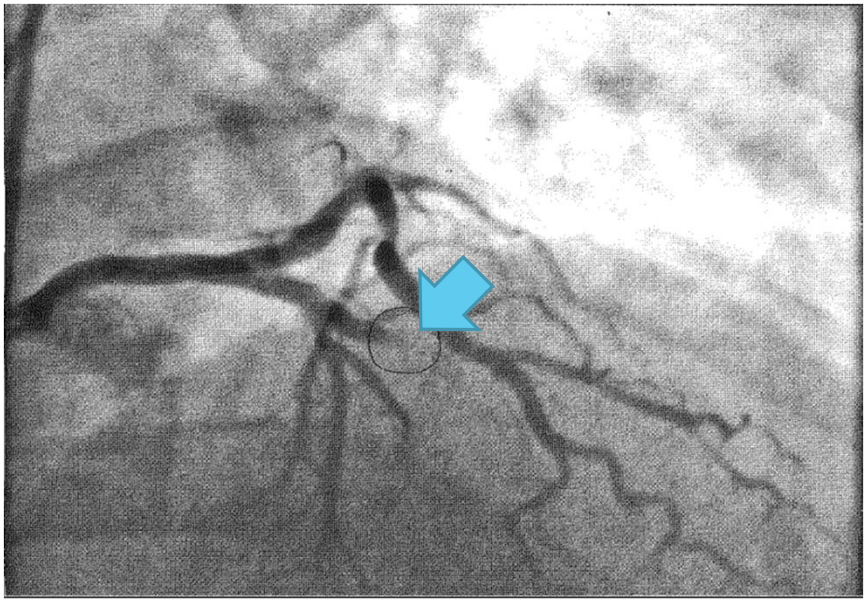
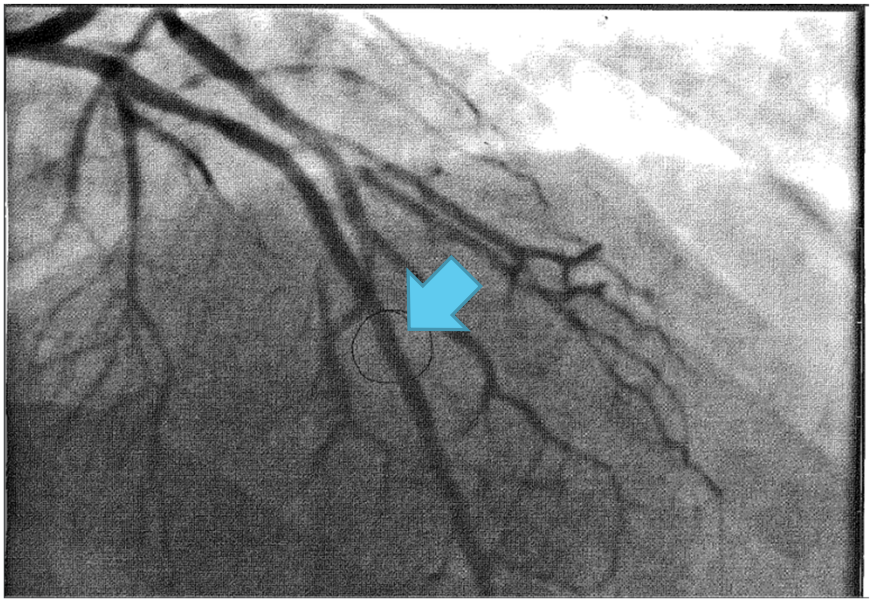
- Amiodarone administered

Intervention

- LAD – after a wire was passed down the vessel an Emerge 3.0 x 15mm balloon was placed and inflated restoring blood flow
- A Synergy XD 2.5 x 24mm drug eluting stent was placed just beyond the previously placed stents. Then just proximal and overlapping a 3.0 x 20 Synergy XD drug eluting stent was placed
- Final angiography revealed 0% residual stenosis, TIMI 3 flow, excellent stent expansion, no evidence of vessel trauma or dissection
- Patient transferred to PCU post procedure, normal mental status after procedure



Angiogram LAD– Pre PCI



Angiogram LAD – Post PCI

Progression to Discharge

- 7/8
  - LV 45% per echo
- 7/9
  - Cardiac Rehab visit
  - Care Manager visit
- 7/10
  - Patient discharged home on the following meds:
    - ASA, Plavix, Zetia, Lisinopril, and Metoprolol
    - Patient unable to tolerate Statins due to Myositis of lower extremities
- Phase II Cardiac Rehab post discharge