

## **Rural Acute Non ST-Elevation Acute Coronary Syndrome (NSTE-ACS) Composite Score Criteria:** At least 75% Compliance (AHACAD85)

12 Lead ECG (Electrocardiogram) Within 10 Minutes of Arrival (AHACAD96)

**Early Cardiac Troponin Results Within** 90 Minutes of Arrival (AHACAD95)

**Risk Stratification of NSTE-ACS Patients** (AHACAD101)

Low-Risk NSTE-ACS Follow Up Appointment (AHACAD100)

Intermediate-Risk NSTE-ACS Cardiac Testing (AHACAD99)

High-Risk NSTE-ACS Anticoagulant Administration Prior to Transfer (AHACAD97)

**High-risk NSTE-ACS Transfer to** Percutaneous Coronary Intervention (PCI) Center Within 6 Hours (AHACAD98)

SILVER

Four consecutive guarters and

≥2 STEMI and/or NSTE-ACS



Eight or more consecutive quarters and ≥2 STEMI and/or NSTE-ACS records annuallu



## **Rural Acute ST-Elevation Myocardial** Infarction (STEMI) Composite Score Criteria: At least 75% Compliance (AHACAD84)

12 Lead ECG Within 10 Minutes of Arrival (AHACAD91)

STEMI-Positive 12 Lead ECG to Interfacility Transport Requested Within 10 Minutes (AHACAD94)

Aspirin on Arrival or Prior to Transfer (AHACAD90)

Arrival or Subsequent STEMI-Positive 12 Lead ECG to Transfer to PCI Center within 45 Minutes (Door-In/Door-Out) (AHACAD88)

> IV Thrombolytic Therapy Within **30 Minutes of Arrival** (AHACAD89)

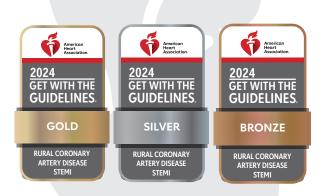
P2Y12 Receptor Inhibitor Administered Prior to Transfer (AHACAD92)

## Anticoagulant Administered Prior to Transfer (AHACAD93)



One calendar guarter and ≥1 STEMI and/or NSTE-ACS record per auarter





## **Eligible Hospitals**

Federally Designated Critical Access Hospitals or Short Term Acute Care Hospitals within Rural Urban Commuting Areas (RUCA) geographically classified as large rural, small rural or isolated.

records annually December 2023 | #GWTGResearch

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