

Rural Acute Chest Pain and Acute Coronary Syndrome (ACS) **Composite Score Criteria:** At least 75% Compliance

12 Lead ECG (Electrocardiogram) within 10 minutes of Arrival for Acute Chest Pain or **Suspected ACS Patients**

Early Cardiac Troponin Results Within 90 Minutes of Arrival

Risk Stratification of Acute Chest Pain or Suspected ACS Patients

Low-Risk Acute Chest Pain or Suspected ACS **Patient Follow Up Appointment**

Intermediate-Risk Acute Chest Pain or Suspected **ACS Patient Cardiac Testina**

High-Risk NSTE-ACS Anticoagulant Administration Prior to Transfer

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



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

12 Lead ECG Within 10 Minutes of Arrival

STEMI-Positive 12 Lead ECG to Interfacility **Transport Requested Within 10 Minutes**

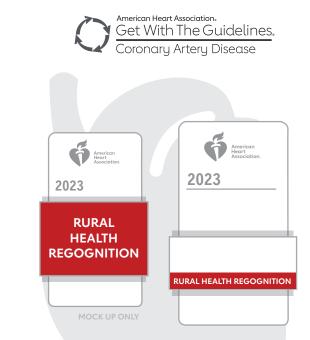
Aspirin on Arrival or Prior to Transfer

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

IV Thrombolytic Therapy Within 30 Minutes of Arrival

P2Y12 Receptor Inhibitor Administered Prior to Transfer

Anticoagulant Administered Prior to Transfer



Coronary Artery Disease (CAD) Rural Recognition is available as a stand-alone award or an add-on banner to a standard awards, starting with 2023 data submitted.

Eligible Hospitals

Federally Designated Critical Access Hospitals

Short-Term Acute Care Facilities and Rural Hospitals located within Rural Urban Commuting Area Codes (RUCA) indicating large rural, small rural and isolated geographic locations





Eight or more consecutive quarters and ≥2 STEMI and/or Acute Chest Pain or ACS records annually

Jan 2023 | #GWTGResearch

Four consecutive quarters and ≥2 STEMI and/or Acute Chest Pain or ACS records annually



≥1 STEMI and/or Acute Chest Pain or ACS record per quarter



One calendar guarter and