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

12 Lead ECG (Electrocardiogram) Within 10 Minutes of Arrival

Early Cardiac Troponin Results Within 90 Minutes of Arrival

Risk Stratification of NSTE-ACS Patients

Low-Risk NSTE-ACS Follow Up Appointment

Intermediate-Risk NSTE-ACS Cardiac Testing

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

STEAMI-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

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

SILVER
Four consecutive quarters and ≥2 STEMI and/or NSTE-ACS records annually

BRONZE
One calendar quarter and ≥1 STEMI and/or NSTE-ACS record per quarter

Eligible Hospitals
Federal 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

Coronary Artery Disease (CAD) Rural Recognition is available as a stand-alone award or an add-on banner to a standard awards, starting with 2022 data submitted.