



# Montgomery County Fire & Rescue Service

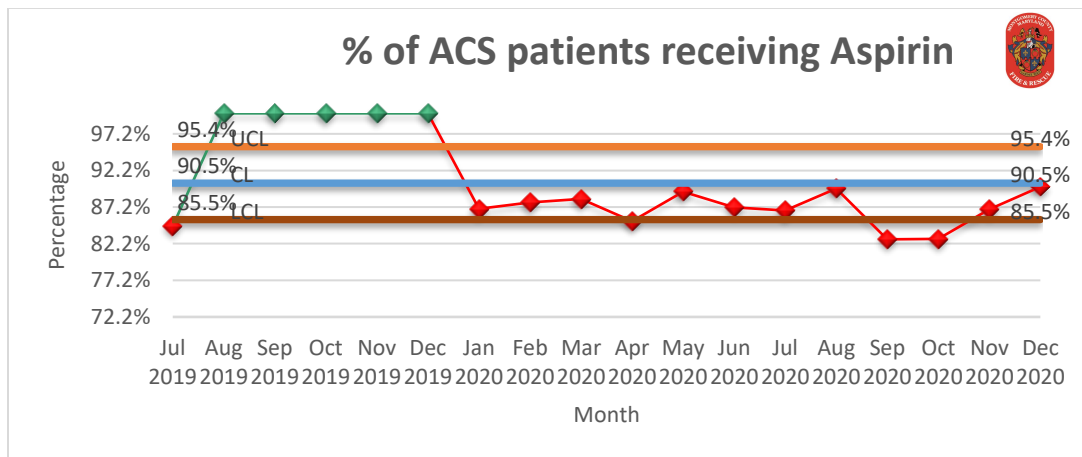
## Division of Operations

### Emergency Medical and Integrated Healthcare Services

#### Treatment of Acute Coronary Syndromes in the era of COVID-19

**Issue:** EMIHS has noticed a sharp and statistically significant decline in the administration of Aspirin to patients with Acute Coronary Syndromes.

Beginning in January of 2020 we noticed a drop from nearly 100% administration of ASA to these patients to steady performance somewhere around 85%. These percentages were calculated after incident review to eliminate patients classified as chest pain who are not having ACS, patients with allergies, and those who had taken it prior to our arrival.



**What we think may be happening:** We have noticed that there are patients who seem to be experiencing chest pain that could be consistent with ACS and who are also PUIs for coronavirus. These “combination” ACS/PUI patients often do not receive aspirin and we think that ACS symptoms are being completely attributed to COVID.

**Please keep in mind:** COVID is a complex disease and hypercoagulability is one of the known pieces of the disease process. Treat PUI patients with ACS symptoms as you would any other ACS patient.

Please continue to treat acute coronary symptoms with these three things that we know will improve the outcome of these patients:

- 12-lead ECG within 10 minutes of arrival (early identification of a STEMI)
- Transmit at least one EKG for ACS patients (early notification of the cath lab if STEMI)
- ASA administration (high therapeutic value/low risk profile intervention)