



THE CARDIAC NURSE IN THE AMBULANCE SERVICE

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OBJECTIVES

- Share: -
 - The historical background of the programme designed to deliver thrombolysis in the ambulance service
 - The change to practice in the pre hospital setting
 - Best practice initiatives
 - Past and present thrombolysis data
 - What the future holds



IMPLEMENTING THE NSF CHD 2000 INTO THE AMBULANCE SERVICE

- **CTN shared target, notoriously difficult to achieve because of difficult journeys and geography**
- Ensuring that patients who are indicated to receive thrombolysis have it administered before hospital and within 60 minutes of calling for professional help
- In 2003 East Anglia ambulance service they decided they wanted to deliver thrombolysis to as many patients in the region as needed it, regardless of the distance to hospital



PRE HOSPITAL THROMBOLYSIS (PHT) CHALLENGES

- Diverse workforce population
 - East Anglia = 3 large counties
- In order to diagnose and deliver prompt treatment within the pre-hospital setting
 - Acknowledging JRCALC guidelines
 - Widening the thrombolysis indications, allowing treatment to be administered to the maximum number of patients who require it
 - Thrombolysis patient group directives
 - Adapting guidelines in line with the acute hospitals
 - **All** paramedics trained to deliver PHT
 - Paramedic to all chest pain calls to consider PHT



COLLABORATIVE WORKING

- Bridging the gap between: -
 - All acute trusts
 - A&E departments
 - Cardiac Care Units
 - Cardiac Nurse Practitioners
- Establishing links with: -
 - Cardiac networks
 - Tertiary centres
 - General practitioners
 - Ambulance personnel and control centres



SCALE OF THE ROLE CHANGING AND IMPLEMENTING NEW PRACTICE

- Training and educating '**a lot**' of paramedics
 - Training packages
 - Yearly updates
 - Individual training
 - Journal clubs, refresher study days
- Technicians
- Communication & trust key aspect of the role
- The need to provide evidence based healthcare
- Clinical quality & audit (MINAP)
- Feedback quality data to all personnel
- Promoting champions & acknowledging best

TELEMETRY & ADVICE

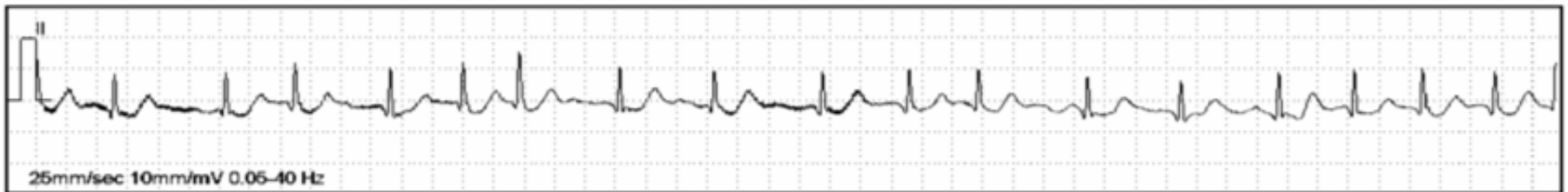
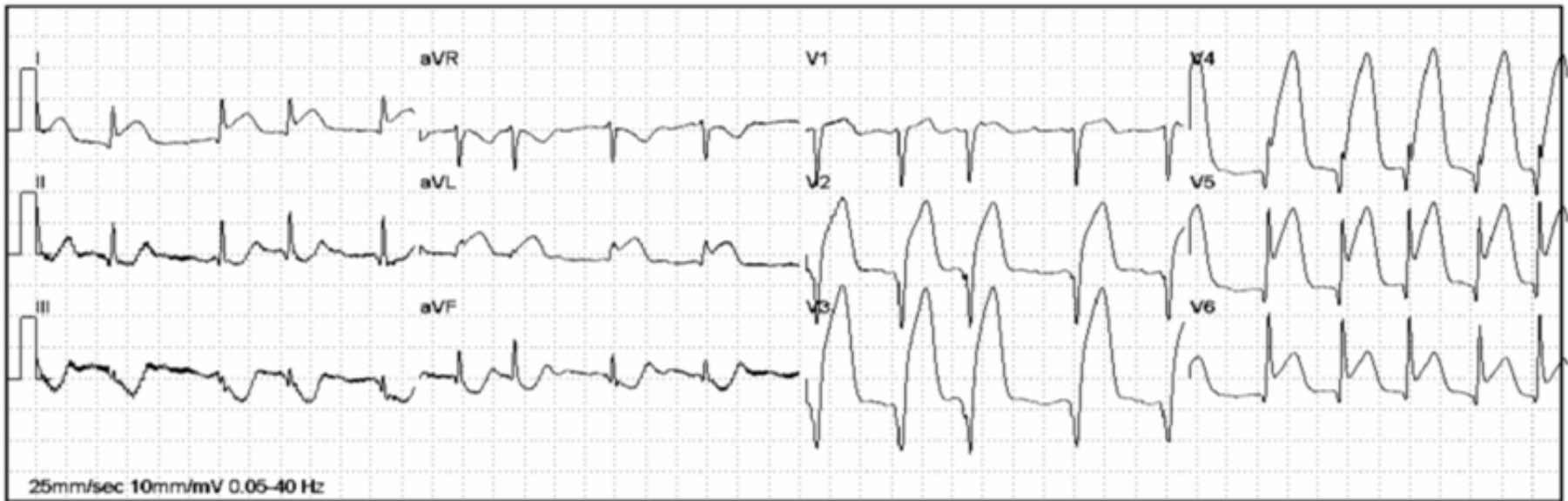


Fig. 3 Patients receiving pre-hospital thrombolytic treatment.

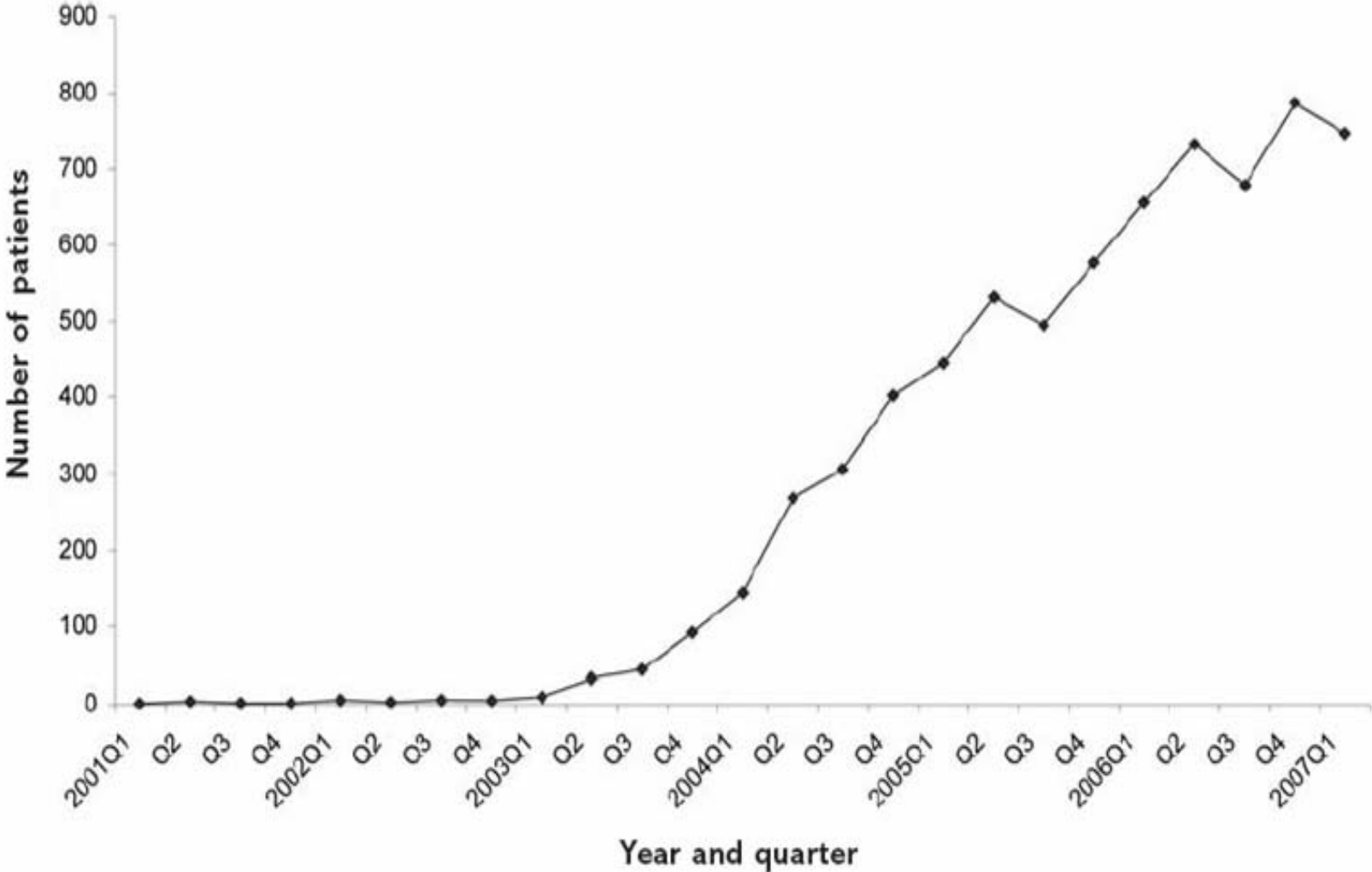


TABLE 3. Ambulance services in England and Wales (see page 6 for key to bold type and symbols used in this table)

Target	Patients having thrombolytic treatment within 60 mins of calling for help		Patients having pre-hospital thrombolysis
	68%		
	%	n	n
England national average	64	7,384	2,380
Staffordshire	77	208	145
Isle of Wight	26	39	2
London	45	55	0
Great Western	58	336	96
North East	65	390	125
North West	68	1,438	300
Yorkshire	70	501	50
East Midlands	57	813	250
West Midlands	66	777	188
East of England	66	1,022	619
South East Coast	62	725	222
South Central	57	517	125
South Western	64	563	258
Wales	40	631	175

Data are only allocated to an ambulance service if an ambulance service code has been entered. This is the reason for discrepancies between the number of pre-hospital thrombolysis cases recorded here and in section 5 of the results.



PRE HOSPITAL THROMBOLYSIS (PHT)

- 2001 the CTN was 24%
- 2007 the CTN was 69%
- Paramedics diagnosing a STEMI and administering thrombolysis in the pre hospital setting has substantially contributed to this achievement
- Combined performance of ambulance services, general practitioners and acute hospital trusts
- Encouraging collaborative working across the NHS
- Successful lead to drive the initiative forward



EAST ANGLIA

- 1st PHT in November 2003
- 2003 - 2007 1535 PHT
- 2003 19% STEMI received PHT
- 2007 70%, 72%, 78%, 79%



RECENT INITIATIVES

- Merger of 6 counties
- Now the East of England Ambulance Service
- PPCI and PHT
- Expanding the cardiac advice line
- Ambulance wide telemetry
- New model of care
- Ambulance CHD links



ESSEX

- Priority to administer PHT in Essex
 - 50% given PHT
 - Support autonomy
 - Introduction of a specialist cardiac nurse
 - Vast geographical area
 - Approximately 600 personnel
 - Long distances to hospital (esp rural areas)
 - If PHT not given CTN times >60 mins
 - Burnham to Broomfield 24 miles/59 minutes



ACKNOWLEDGING EVIDENCE BASED HEALTHCARE

- Recent MINAP guidelines for Heparin in the pre hospital setting
- Primary PCI
- Clopidogrel
- Clexane



THE FUTURE



- NSTEMI
- Trust wide training package
- Links with general practices
- Heart failure
- Arrhythmias
- Cardiac Arrest