

**Abstraction of ECG Elements in ACTION Registry-GWTG
FAQs and Tips for SETRAC Cardiac Care Committee**

ECG FAQs

JUNE 2014

If EMS states in run sheet EKG done at 1200 and there is no interpretation and no EKG dropped off at hospital, can that count as EMS EKG done?

Would you select the following --

- *First ECG Obtained = Pre-Hospital*
- *First ECG Date/Time = date& time on EMS run sheet (1200)*
- *STEMI or STEMI Equivalent = Yes*
- *STEMI or STEMI Equivalent First Noted = Subsequent ECG*

Or would you select the following --

- *First ECG Obtained = After 1st hospital arrival*
- *First ECG Date/Time = date& time of 1st in-hospital ECG*
- *STEMI or STEMI Equivalent = Yes*
- *STEMI or STEMI Equivalent First Noted = First ECG*

Or is there some other combination that should be selected for this kind of scenario?

You must have a documented reading of the ECG in order to include the ECG. The reading can be by EMS or your facility staff, but there must be a reading to include the ECG.

Select the following --

- *First ECG Obtained = After 1st hospital arrival*
- *First ECG Date/Time = date& time of 1st in-hospital ECG*
- *STEMI or STEMI Equivalent = Yes*
- *STEMI or STEMI Equivalent First Noted = First ECG*

If the ER doctor documents in the medical record that a pre-hospital ECG was done, can that be used as documentation that there was a pre-hospital ECG?

If there is documentation of the reading then you may enter this pre-hospital ECG. The challenge may be a missing time. You may have to leave the first ECG time field blank. This field has an 80% threshold, so as long as you have entered in 10 records and only have 2 blanks you will pass the DQR.

MAY 2014

Does the physician need to sign the pre-hospital ECG for it to “count”?

No, a physician does not have to sign the 12 lead ECG for it to count. BUT if the actual 12 lead ECG is missing from the chart, then physician documentation that a 12 lead ECG was done pre-hospital and what it showed, DOES count. Physician documentation trumps pretty much anything else. Let's say the physician saw the 12 Lead ECG on his phone or looked at the copy that EMS brought in, but the 12 lead ECG didn't make it to the chart. If the physician says ECG was done pre-hospital and what it showed, it counts.

An EMS agency picks up patients in close proximity to a particular hospital but has difficulty transmitting the pre-hospital ECG. So EMS just gives it to the hospital when they arrive. Can the hospital count this as a pre-hospital ECG?

Yes, the hospital can count any pre-hospital 12 lead ECG. It doesn't have to be transmitted.

MARCH 2014

Can the EMS run sheet serve as documentation for...

- *First ECG Obtained?*
- *12 lead ECG time?*
- *12 lead ECG interpretation?*

Yes, the EMS run sheet suffices as documentation for each of these three questions. Physician interpretation of the ECG is not required. However, if the physician in the ED disagrees with the EMS interpretation and notes it in the chart, the physician interpretation would over-ride the EMS documentation.

ECG Abstraction Comments/Suggestions

MAY 2014

We're posting all STEMI calls, in house or EMS, on a website with brief history and follow up angio. We're loading the last year now. So, it will be a month or so but the link will be available through heartsoundslab.com. It might be a nice educational link for HFD.