**Very Early Discharge for STEMI Patients**

ie between 20 & 36 hours

(Across midnight only once)

**INCLUSION CRITERIA**

**Clinical on Admission**

1. Age ≤ 75 yrs
2. Systolic BP ≥ 90 mm Hg
3. Heart rate ≤ 100 b/min
4. Killip class = 1
5. Creatinine Clearance ≥ 60 ml/min
6. No history of prior stroke
7. No history of cardiac arrest (OHCA or in-hospital)

**Cath Lab**

3. Post cath/PCI TIMI flow = 3
4. LV EF ≥ 40 (or by 2D Echo)
5. Absence of Left Main or severe 3 vessel CAD

**After Cath/PCI**

1. No recurrence of ischemic symptoms
2. No significant arrhythmias (included non-sustained VT, AFib)
3. No need for mechanical support (ie IABP)

---

1. **Step 1.** Assess patient to ensure they meet the inclusion criteria for Very Early Discharge
2. **Step 2.** Patient Qualifies for Very Early Discharge
3. **Step 3.** Case to be discussed with Staff MD and must be approved by the staff MD
4. **Step 4.** Patient is referred to Cardiac Telehealth and enrolled into the ACS IVR system (phone call to 67050 or fax 613-696-7150 or EPIC in-basket message to Cardiac Telehealth)
5. **Step 5.** Discharge Medications reviewed with patient
6. **Step 6.** Stop Light Tool provided to patient
7. **Step 7.** Cardiology Discharge Book provided or directed to external website for the discharge book.
8. **Step 8.** Notify Cardiology Nursing Coordinator of Very Early Discharge
9. **Step 9.** Discharge Patient
10. **Step 10.** Follow up in 4-6 weeks with Interventionalist who performed the PCI.

*Criteria developed using the UOHI STEMI database*