STEMI

Team of 4

* A Doctor
* B Resident
* C Nurse 1
* D Nurse 2 agitated new hire

**Scenario**: patient in ward or green area of the ED reports onset of chest pain -> positioning the patient safely-> STEMI

**PERFORMANCE**

the patient reports to D that he has started to feel thoracic pain. D goes to C and tells him what has happened. C goes to B and reports the incident B goes to A who decides to go and see this patient.

A tells D to place the monitor on the patient and perform an ECG and asks C to place a venous access.

D all agitated looks at the electrodes he cannot remember how to position them for the ECG and puts them inverted.

A meanwhile tells B to examine the patient and ask basic questions (type of pain, medical history etc).

the ECG looks strange, they see that the electrodes were placed incorrectly. A gets mad at D and tells C to run the ECG again and tells B (who is doing everything else) to call the cardiologist and bring the ultrasound machine.

B who is doing PIANO all the previous actions says yes and then does everything but call the cardiologist.

A says "let's administer the antiaggregant" to C who prepares 1 g of acetylcysteine and puts it in 500 of SF without asking for confirmation of dosage and mode of administration

After a while, A asked B what the cardiologist had told him and B replied that he had forgotten to call him.

A gets furious calls the cardiologist reports that it is an anterior acute myocardial infarction (AMI) and the cardiologist says to take the patient to the cardiac intensive care unit (CICU)

END SCENARIO

Steps:

- Securing with track positioning

- Performing ECG

- Calling the cardiologist for hemodynamic activation

- Administration of antiplatelet

Main errors:

- Electrode positioning error (conceptual error)

- Non-call of cardiologist (task allocation error/ closed circuit error)

- Error in administration of antiplatelet (communication error)

Debriefing: