Acute coronary syndromes: 3a-STEMI patients receiving fibrinolysis or PCI

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# Acute coronary syndromes: 3a-STEMI patients receiving fibrinolysis or PCI

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| Identifying and definitional attributes |
| Metadata item type: | Indicator |
| Indicator type: | Indicator |
| Short name: | Indicator 3a-STEMI patients receiving fibrinolysis or PCI |
| METEOR identifier: | 612058 |
| Registration status: | [Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 12/09/2016 |
| Description: | Proportion of patients with [**ST-segment-elevation myocardial infarction (STEMI)**](https://meteor-uat.aihw.gov.au/content/629401)at first emergency contact presenting within 12 hours of symptom onset and receiving fibrinolysis or percutaneous coronary intervention (PCI). |
| Rationale: | The *Guidelines for the Management of Acute Coronary Syndromes 2006*recommend that "*patients with STEMI who present within 12 hours of the onset of ischaemic symptoms should have a reperfusion strategy implemented promptly*" (Acute Coronary Syndrome Guidelines Working Group 2006). |
| Indicator set: | [Clinical care standard indicators: acute coronary syndromes](https://meteor-uat.aihw.gov.au/content/612027)[Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 12/09/2016 |
| Outcome area: | [Timely reperfusion](https://meteor-uat.aihw.gov.au/content/624371)[Health!](https://meteor-uat.aihw.gov.au/RegistrationAuthority/14), Standard 12/09/2016 |

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| Collection and usage attributes |
| Computation description: | Both the numerator and the denominator include patients with STEMI.Both the numerator and denominator exclude patients with a diagnosis of left bundle branch block (LBBB). This is where [Episode of care—principal diagnosis, code (ICD-10-AM 9th edn) ANN{.N[N]}](https://meteor-uat.aihw.gov.au/content/588987) or [Episode of care—additional diagnosis, code (ICD-10-AM 9th edn) ANN{.N[N]}](https://meteor-uat.aihw.gov.au/content/588981) is one of the following:* I44.4 Left anterior fascicular block
* I44.5 Left posterior fascicular block
* I44.6 Other and unspecified fascicular block
* I44.7 Left bundle-branch block, unspecified.

For the numerator, patients undergoing PCI include those for which one of the following [Episode of admitted patient care—procedure, code (ACHI 9th edn) NNNNN-NN](https://meteor-uat.aihw.gov.au/content/589101) is recorded:* 38300-00 [670] Percutaneous transluminal balloon angioplasty of 1 coronary artery
* 38303-00 [670] Percutaneous transluminal balloon angioplasty of >=2 coronary arteries
* 38306-00 [671] Percutaneous insertion of 1 transluminal stent into single coronary artery
* 38306-01 [671] Percutaneous insertion of >= 2 transluminal stents into single coronary artery
* 38306-02 [671] Percutaneous insertion of >= 2 transluminal stents into multiple coronary arteries.

Alternatively, for hospitals collecting the [Acute coronary syndrome (clinical) National best practice data set](https://meteor-uat.aihw.gov.au/content/621789), the data element [Person—percutaneous coronary intervention procedure type, code N](https://meteor-uat.aihw.gov.au/content/359751) can be used, where there is a value of 1 Balloon angioplasty only, 2 Bare metal stent implantation or 3 Drug-eluting stent implantation recorded.The numerator also includes patients who are administered fibrinolytic drugs. These are not coded using the Australian Classification of Health Interventions (ACHI). However, for hospitals using the [Acute coronary syndrome (clinical) National best practice data set](https://meteor-uat.aihw.gov.au/content/621789), the data element [Person—fibrinolytic drug administered, code N](https://meteor-uat.aihw.gov.au/content/356870) can be used to indicate fibrinolytic drug therapy, where the values are one of the following:

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| 1 | Streptokinase |
| 2 | t-PA (Tissue Plasminogen Activator) (Alteplase) |
| 3 | r-PA (Reteplase) |
| 4 | TNK t-PA (Tenecteplase) |

The denominator excludes patients for whom PCI and fibrinolysis are contraindicated (where the contraindication is documented in their medical record). (For hospitals using the [Acute coronary syndrome (clinical) National best practice data set](https://meteor-uat.aihw.gov.au/content/621789), contraindication for fibrinolytic therapy can be identified using the data element [Person—reason for non prescription of pharmacotherapy, code N](https://meteor-uat.aihw.gov.au/content/347222), where a value of 2 'Contraindicated' is recorded.) Contraindications may include advance care directives, being on a palliative care pathway, and clinical judgement, subject to discussion with patients, family and carers.Presented as a percentage. |
| Computation: | (Numerator ÷ denominator) x 100 |
| Numerator: | Number of patients with STEMI arriving at the emergency department or being attended to by ambulance officers within 12 hours of symptom onset, who receive fibrinolysis or PCI. |
| Denominator: | Number of patients with STEMI arriving at the emergency department or being attended to by ambulance officers within 12 hours of symptom onset. |
| Representational attributes |
| Representation class: | Percentage |
| Data type: | Real |
| Unit of measure: | Episode |
| Format: | N[NN] |
| Source and reference attributes |
| Submitting organisation: | Australian Commission on Safety and Quality in Health Care |
| Reference documents: | Acute Coronary Syndrome Guidelines Working Group 2006. Guidelines for the management of acute coronary syndromes 2006. Medical Journal of Australia 184(8):S1–S30. |