

PROTOCOL

Aspirin Therapy with Chest Pain/Acute Coronary Syndrome (ACS)

This protocol will be followed by School Nurses only, not by other school personnel, as it requires assessment skills to determine if the protocol is applicable. The protocol is applicable to adults only, and not students, regardless of the student's age.

A. Indications for this protocol include one or more of the following:

1. The classic symptom associated with an Acute Coronary Syndrome (ACS) is chest discomfort, but symptoms may also include discomfort in other areas on the upper body, shortness of breath, diaphoresis, nausea and/or vomiting, and dizziness. Many people complain of sub-sternal chest pain, pressure or discomfort unrelated to an injury or other readily identifiable cause.
2. History of previous ACS/Acute MI with recurrence of similar symptoms.
3. Any adult with a history of cardiac problems who experiences lightheadedness or syncope. Atypical symptoms (other than chest discomfort) are more common in women, the elderly, or those with Diabetes (hot or burning sensation, or even tenderness to touch, that may be located in the back, shoulders, arms or jaw. Sudden, extreme fatigue is also common. Often they have no actual chest discomfort at all).

B. If adult with above symptom(s) has

1. no history of allergy to Aspirin...
2. no signs of Stroke or history of Stroke...
3. no active bleeding (ie. bleeding gums, bloody or tarry stools, etc)...

... Administer 4 (four) 81 mg low dose aspirin (324 mg total) or 1 (one) regular strength Aspirin (325 mg). Have the person chew the Aspirin before swallowing. If the person needs water to wash down the Aspirin, they may have one mouthful of water to swallow the Aspirin, but no more. Record the time the Aspirin is administered. 911 should be called whenever this protocol is put into place. Administer CPR/use AED if indicated.

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Date



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