

Mission: Lifeline Recognition Measures for STEMI Systems of Care

There are three levels of involvement with Mission: Lifeline: Participation, Recognition and Certification. For every program, all system components (EMS, Non-PCI/STEMI Referral Centers and PCI/STEMI Receiving Centers) requirements must be met in order for the system to qualify for each level of involvement.

The Mission: Lifeline Recognition Program will acknowledge STEMI Systems, EMS, Non-PCI/STEMI Referral Centers and PCI/STEMI Receiving Centers for their efforts to improve quality of care for STEMI patients. This is the second level of involvement. Systems and their components should participate in the approved Mission: Lifeline national registry program, ACTION Registry-GWTG. All achievement measures will be considered in the composite score. All reporting measures will be reviewed and collected but will not be used in the composite score. It should be noted that at this time, only data from STEMI Referral and STEMI Receiving Center Programs can be submitted.

Criteria:

- 85% or greater composite score with no single measure below 75% on the following achievement measures for specified periods of time
- Bronze = 90 consecutive days, Silver = 12 consecutive months, Gold = 24 or more consecutive months
- Annual award period for consideration = January – December
- Annual award submission period = January 1st – March 31st following year

EMS

Achievement Measures:

1. Percentage of patients with non-traumatic chest pain > 35 years treated by EMS for whom pre-hospital 12-lead electrocardiograms were obtained
2. Percentage of STEMI patients with first pre-hospital medical contact to balloon inflation (first device used) time within 90 minutes (within 30 minutes for administration of fibrinolytic therapy)

Reporting Measures:

1. Time from symptom onset to EMS dispatch
2. Time from EMS dispatch to vehicle arrival at hospital door
3. Time from first medical contact to balloon inflation (first device used)
4. Percentage of patients with STEMI treated by EMS for whom pre-hospital 12-lead electrocardiograms were obtained
5. Percentage of patients with field diagnosis of STEMI and field activation of the Cardiac Catheterization Laboratory for intended primary PCI

STEMI Referral Center

Achievement Measures:

1. Percentage of STEMI patients with a door-to-first ECG time <10 minutes
2. Percentage of reperfusion –eligible patients receiving any reperfusion (PCI or fibrinolysis) therapy
3. Percentage of reperfusion –eligible patients with door-to-needle time within 30 minutes
4. Percentage of reperfusion –eligible patients transferred to PCI center with door-in- to door-out time within 45 minutes
- * Facility goal to make STEMI Referral Center ED door-to-balloon (first device used) time within 90 minutes (including transport time)
5. Percentage of STEMI patients receiving aspirin within 24 hours
6. Percentage of STEMI patients on aspirin at discharge
7. Percentage of STEMI patients on beta blocker at discharge
8. Percentage of STEMI patients with LDL>100 who receive statins or lipid lowering drugs
9. Percentage of STEMI patients with left ventricular systolic dysfunction on ACEI/ARB at discharge
10. Percentage of STEMI patients that smoke with smoking cessation counseling at discharge

Reporting Measures

1. STEMI Referral Center ED door-to-balloon (first device used) time within 90 minutes (including transport time)

STEMI- Receiving Center

Achievement Measures:

1. Percentage of STEMI patients with a door-to-balloon (first device used) time within 90 minutes, non-transfer
2. Percentage of STEMI patients with first medical contact to balloon inflation (first device used) time within 90 minutes, non-transfer
3. Percentage of reperfusion –eligible patients receiving any reperfusion (PCI or fibrinolysis) therapy
4. Percentage of STEMI patients receiving aspirin within 24 hours
5. Percentage of STEMI patients on aspirin at discharge
6. Percentage of STEMI patients on beta blocker at discharge
7. Percentage of STEMI patients with LDL>100 who receive statins or lipid lowering drugs
8. Percentage of STEMI patients with left ventricular systolic dysfunction on ACEI/ARB at discharge
9. Percentage of STEMI patients that smoke with smoking cessation counseling at discharge

Reporting Measures:

1. In-hospital mortality
2. Percentage of STEMI patients with a first medical contact to balloon inflation (first device used) time within 90 minutes, transfer
3. Percentage of STEMI patients with a STEMI Referral Hospital door-to-balloon (first device used) time within 90 minutes, transfer
4. Percentage of STEMI patients with a STEMI-Receiving Hospital door- to-balloon (first device used) time within 90 minutes, transfer

System**Achievement Measure:**

1. Percentage of STEMI patients with first medical contact to balloon inflation (first device used) time within 90 minutes, non-transfer

Reporting Measures:

1. Survival to hospital discharge of all STEMI patients (EMS and STEMI-Receiving Center to monitor jointly)
2. Percentage of STEMI patients with a first medical contact to balloon inflation (first device used) time within 90 minutes, transfer
3. Percentage of STEMI patients with a STEMI Referral Hospital door-to-balloon (first device used) time within 90 minutes, transfer