

RIGHT VENTRICULAR AMI

- A. Perform **Initial Treatment / Universal Patient Care Protocol**
- B. Indication for this protocol is any patient with signs of an Inferior Wall ST Elevation Myocardial Infarction (STEMI) with concurrent ST elevation in right chest lead V4R.

Note: Administration of sublingual nitroglycerin is CONTRAINDICATED in this situation.

- C. Administer oxygen by appropriate route to maintain SpO₂ at 94 - 99%.
- D. If patient has no history of a true allergy to aspirin and has no signs of active bleeding (i.e., bleeding gums, bloody or tarry stools, etc.), then administer 4 (four) 81 mg chewable Aspirin orally (324 mg total). Aspirin may be administered prior to establishing IV.
- E. Establish two (2) IV lines, preferably 18 gauge or larger, of normal saline.
- F. If chest pain persists:
- Administer **Morphine Sulfate** 2 mg slow IV may repeat every five (5) minutes up to 10 mg unless pain is relieved.
 - Use caution if hypotensive and/or bradycardic. Consider use of **Fentanyl (Sublimaze®)**.
 - If systolic BP drops below 90 mm/Hg during administration of **Morphine Sulfate**, discontinue analgesic administration and administer IV fluid bolus 250 mL Normal Saline and contact Medical Command.

-OR-

Administer **Fentanyl (Sublimaze®)** 1 microgram/kilogram – up to 100 micrograms max single dose, slow IV. Additional doses require **MCP order**.

If no pain relief after two (2) minutes, may repeat Fentanyl **PER MCP order** at 1 microgram/kilogram – up to 100 micrograms max per dose.



- If discomfort persists, **Contact Medical Command Physician** to discuss further treatment. Monitor blood pressure and respiratory effort.



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NOTE: Administration of pain medications may not be tolerated well in patients over 55 years of age. Doses should be initiated low and repeated as needed. Administration of these medications in patients > 55 years of age shall be as follows:

Administer **Fentanyl** (*Sublimaze®*) 0.5 microgram/kilogram– up to a max initial dose of 100 micrograms. Providers may repeat this dose one (1) time as a standing order. Additional doses require **MCP order**.

-OR-

Administer **Morphine Sulfate** 1 mg slow IV; may repeat every five (5) minutes up to 10 mg unless pain is relieved.

- Use caution if hypotensive and/or bradycardic. Consider use of **Fentanyl (Sublimaze®)**.
- If systolic BP drops below 90 mm/Hg during administration of **Morphine Sulfate**, discontinue analgesic administration and administer IV fluid bolus 250 mL Normal Saline and contact Medical Command.

- G. Monitor blood pressure carefully. If systolic BP falls below 90 mm/Hg, discontinue pain medications and treat hypotension per **Shock Protocol 4108**
- H. Treat dysrhythmias according to specific protocols.
- I. If transport time permits, complete AHA Fibrinolytic Checklist (Appendix A).