

**NEW JERSEY DEPARTMENT OF HEALTH AND SENIOR SERVICES  
OFFICE OF EMERGENCY MEDICAL SERVICES  
EMT-BASIC TREATMENT PROTOCOLS**

**Atraumatic Chest Pain/Discomfort**

**Immediately perform the following:**

- Scene size up and initial assessment
- Initially administer 100% oxygen by non-rebreather mask at 15 liters/minute. If the patient becomes anxious or is otherwise unable to tolerate this device, switch to a nasal cannula at 6 liters/minute.
- Place the patient in a position of comfort unless necessitated by other factors.
- Ensure that advanced life support (ALS) has been requested and monitor response time.
- Obtain baseline vital signs and obtain the SAMPLE history.
- Conduct the focused history and physical exam.

**Initiate each of the following two treatments as indicated and appropriate if the patient is an adult still experiencing atraumatic chest pain or discomfort of known or suspected cardiac origin.**

**Prompt transport is important--do not delay transport just to administer these treatments.**

<b>Therapy</b>	<b>Oral acetylsalicylic acid (aspirin, ASA)</b>	<b>Sublingual nitroglycerin (NTG)</b>
<b>Medication source and form</b>	<ul style="list-style-type: none"> <li>• Can be prescribed for the patient or available to the patient on scene</li> <li>• Tablet only</li> </ul>	<ul style="list-style-type: none"> <li>• Must be prescribed for, and supplied by, the patient</li> <li>• Sublingual tablet or spray only</li> </ul>
<b>Contraindications</b>	<ul style="list-style-type: none"> <li>• Age under 19 years old.</li> <li>• Patient has taken routine daily dose or stat dose (e.g., per dispatcher instructions) prior to your care for this episode</li> <li>• Known hypersensitivity or allergy to ASA</li> <li>• Bleeding or active bleeding disorder</li> <li>• Pregnancy</li> <li>• Abdominal pain or pulsations, suspicion of thoracic or abdominal aortic aneurysm</li> <li>• ASA is expired</li> </ul>	<ul style="list-style-type: none"> <li>• Infants and children</li> <li>• Patient has taken 3 doses of NTG within a 15-minute time frame prior to or during your care for this episode</li> <li>• Systolic BP &lt; 100</li> <li>• Recent head injury</li> <li>• Use of erectile dysfunction drugs within the past 72 hours</li> <li>• NTG is expired</li> </ul>
<b>Administration</b>	<ul style="list-style-type: none"> <li>• During SAMPLE Hx determine how much aspirin the patient took for this onset of chest discomfort prior to EMS arrival. Obtain adult (commonly 162 or 325 mg) or up to four chewable aspirin tablets (usually 81 mg each) and administer to a cumulative dose not exceeding 325 mg for this episode.</li> <li>• Have the patient thoroughly chew then swallow the aspirin tablet(s), even if the tablet is not a "chewable" aspirin. A very small sip of water may be given if the patient can't chew this well (e.g., dentures are not in).</li> <li>• Minimize interruption to mask oxygen for ASA administration.</li> </ul>	<ul style="list-style-type: none"> <li>• Assist with one tablet or spray under the patient's tongue.</li> <li>• Reassess chest discomfort and vital signs after 1-2 minutes.</li> <li>• Repeat one dose of NTG until a maximum of three has been administered. Additional doses beyond this only by direction of on-line medical control.</li> </ul>

**Document the time and amount of all administered doses of medication. Communicate this during transfer of care to ALS or receiving facility staff.**

**REMEMBER: WHEN QUESTIONS OR CONCERNS ARISE, CONTACT MEDICAL CONTROL**