



Provider Education Exam

Please complete the following questions and turn in as directed by your institution. You may refer to the provider training text and video for assistance during the exam.

Name: _____

Institution: _____

Date: _____

() (*Initial please*) I certify that I have read the provider training text and have viewed the training video prior to completion of this exam.

- 1) **True / False (*circle one*) Time to reperfusion in patients with ST-Elevation MI (STEMI) is one of the most important factors in successful treatment – particularly early in an infarct. This is because most damage happens quickly after blockage first occurs.**

- 2) **Which one of the following is NOT one of the four keys essential in STEMI detection and treatment utilizing Project UPSTART?**
 - a. Consistent utilization of the “UPSTART Screening ECG Protocol” as a guide for obtaining screening ECGs.
 - b. Immediate opening of a STEMI ALERT PACKET whenever a STEMI is detected.
 - c. Completion of Data Sheets A & B during a STEMI ALERT.
 - d. Insuring proper Data Management – making sure that forms go where they need, allowing for evaluation and feedback.
 - e. Always calling the cardiologist before treating the patient.

- 3) **Why is the use of a STEMI ALERT PACKET so important when a STEMI is detected?**
 - a. The checklists in the packet give each person involved in treating that STEMI a very clear idea of what they need to do.
 - b. It allows coordination of effort between the physician, nurse and STEMI scribe; this permits the patient to be treated quickly and efficiently with minimal wasted effort.
 - c. Completion of the data sheets within the packet allow for reliable collection of certain information that is very important for quality improvement.
 - d. Opening the packet alerts the nursing supervisor that a STEMI is in progress.
 - e. A, B & C are all important benefits of opening the STEMI ALERT PACKET.

4) **True / False (circle one) It is easy to tell by history taking and physical exam if a STEMI is occurring; the screening ECG merely confirms the diagnosis.**

5) **Which of the following answers is correct?**

- a. Patients with STEMI always benefit from treatment with PCI (heart catheterization) as compared to thrombolytic drugs - even if they have to wait several hours to get to a PCI lab.
- b. Obtaining screening ECGs on all patients who fit criteria is the only way to reliably avoid missing STEMI in patients with “atypical symptoms”.
- c. During a STEMI ALERT it’s important that the patient be treated as quickly and efficiently as possible: TIME =MUSCLE!
- d. Data Sheet B (yellow) is completed during the STEMI ALERT and is always sent with the patient to their final treatment site (i.e. the Cath lab or to another facility).
- e. B, C & D are all true.

Questions 6 – 10 are matching. Use each answer only once.

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|--------------------------------|---|
| 6) ___ R2R | a. The STEMI ALERT PACKET. It contains data sheets A & B and the provider checklists; it should be opened for every STEMI ALERT. |
| 7 ___ Accurate data collection | b. “ <i>Recognition to Reperfusion</i> ” The interval between STEMI detection and reperfusion treatment. Shortening this interval is our goal. |
| 8) ___ STEMI Scribe | c. Orange in color. Filled out during a STEMI ALERT; it is then sent to the ED QI person. |
| 9) ___ Data Sheet A | d. The key to improving any complicated process such as the STEMI ALERT process. |
| 10) ___ Bright red in color | e. A key member of the STEMI treatment team. They insure nothing gets overlooked and play a key role in communication. Can be any member of the ED staff. |

11) **True / False (circle one) Data Sheets A & B are complicated and take a great deal of time to complete during a STEMI ALERT. It’s therefore better to complete them after the alert is over.**

12) All of the following regarding Data Sheets A & B are true *except*:

- a. The use of two data sheets prevents the loss of valuable data if one is misplaced.
- b. All ED staff members involved in a STEMI ALERT should work together to complete Data Sheets A & B during the alert, not afterwards.
- c. Its very important that the data sheets are completed; they help improve the next STEMI ALERT thru provider feedback based on the information on the sheets.
- d. Data sheet B is always sent with the patient when they leave the ED; the second part of the form is filled out by the Cath lab or receiving hospital.
- e. Data sheets A & B are part of the medical record. Therefore, never fill them out if a delay has occurred in the process. This will protect the hospital from liability.

13) True / False (*circle one*) The role of the nurse is extremely important during a STEMI ALERT. They are the key person responsible for fast and efficient preparation of the STEMI patient for the PCI lab or for administration of thrombolytic medications.

14) True / False (*circle one*) Early detection of STEMI on screening ECG is the essential first step of STEMI care since without early recognition there can be no progress towards early reperfusion!

15) All of the following are key components of Project UPSTART *except*:

- a. The careful measurement of *Recognition to Reperfusion* time on every STEMI patient, even if they are transferred to another institution.
- b. The emphasis on aggressive use of screening ECG's to detect STEMI early!
- c. The use of data collection to find the individual responsible for each delay and punish them.
- d. The emphasis on working closely with each institution to determine what works best for STEMI patients presenting at their institution and then customizing the UPSTART process to incorporate these best practices.
- e. The use of prompt provider feedback to rapidly address problems or concerns.
- f. A focus on a systematic approach to improvement rather than looking at individual error.

16) True /False (*circle one*) Time to treatment is extremely important in STEMI. ¹Therefore we should do our best to minimize R2R time for every patient, even if we are currently meeting national standards.