

Probable Cardiology Admission
As per ED Senior

ST elevation MI
Ventricular Arrhythmias
Bradycardia requiring pacing
Cardiogenic shock

Bleep on call Cardiology SPR
(Bp 8850 or via switchboard if after 21:00)
Cath lab / CCU / ITU

Primary Cardiac Pathology

- ACS / NSTEMI as per chest pain pathway
- Lone AF (not 2ndry to infection etc)
- Cardiogenic syncope
- Decompensated valve disease
- Heart failure in absence of significant frailty (Rockwood ≤ 4)
- All ACHD or cardiac transplant pt

Add to Cardiology list for PTWR
(If haemodynamically unstable / dynamic ECG changes contact on call Cardiology SPR Bleep 8850 or via switchboard if after 21:00)
Cardiology Bed

All Others

ACUTE FLOOR CLERKING
SENIOR REVIEW
08:00-21:00 On Call Cardiology Registrar (8850) or
21:00-08:00 Medical Registrar

08:00-21:00 Cardiology Reg to discuss with Medical Reg/Consultant if cardiology admission felt not appropriate
Acute frailty consultant 62011, Acute medical consultant 62070

Significant Frailty (Rockwood ≥ 5) or Comorbidity
Appropriate for conservative management

Remains under Medical Team
Frailty / Medical Bed

Not primary cardiac pathology

Remains under Medical Team
Medical Bed