

Factors influencing triage allocation for patients with Acute Myocardial Infarction

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Background

Accurate triage of patients with AMI is essential as mortality associated with AMI is directly linked to time taken to receive treatment. Research has indicated that a substantial proportion of patients with AMI receive a lower urgency triage category than recommended by international guidelines. The reasons for this under-triage remain unclear. This study explored factors that influence the triage category assigned by the triage nurse for patients presenting to the ED with AMI.

Method

This was a retrospective analysis of 12 months of data, on adult patients presenting the ED who were ultimately diagnosed with AMI. Study data were obtained from hospital databases and included patient demographics, patient clinical characteristics and nurses' experience.

Results

20% of the 153 patients in this study were given a lower urgency triage than recommended (Australian Triage Scale (triage category 3-5). A high percentage of the under triaged group presented with an absence of chest pain and of these one third presented with a mechanical fall. In line with past AMI research females and elderly patients are under triaged. There was a trend towards under-triage for more experienced nurses (>2yrs experience).

Conclusions

Under triage of AMI is of concern with 1 in 5 presentations having delays to medical treatment. The absence of chest pain is the defining feature in this group of patients along with other pre-acknowledged factors such as being of female gender and elderly. Further study exploring the characteristics and other potential influencing factors of under triage in AMI would benefit this disadvantaged group of patients.