

# Appropriateness of Air Medical Transport in Acute Coronary Syndrome (ACS)

## **Position Statement of the Air Medical Physician Association**

Revised and Approved by the AMPA Board of Trustees

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## BACKGROUND

ST elevation MIs (STEMI) and ACS are common reasons to utilize air medical transport. Regionalization of cardiac care to highly specialized centers, increasing the use of invasive and time sensitive therapies, and efforts to minimize both the absolute time to therapy and the dangerous out-of-hospital time are significant drivers in improving cardiac care and for increasing the utilization of air medical transport.

## AMPA POSITION STATEMENT

AMPA supports the use of air medical transport for patients with ACS requiring or potentially requiring urgent/time-sensitive intervention not available at the sending facility. Similarly AMPA supports the use of air medical transport for STEMI patients directly from the scene to PCI capable hospitals as part of a system of prehospital STEMI care.

As outlined by the American Heart Association, “STEMI patients should be transported directly to the closest regional primary PCI-capable hospital if it can be reached (by ground or air) quickly enough that the time from initial patient contact to PCI is within 90 minutes. Patients flown from the scene should have signs, symptoms, and ECG consistent with STEMI.

Furthermore, AMPA acknowledges that scene air medical transport of STEMI patients occurs routinely and supports that the medical necessity is determined by the requesting authorized provider based on regional policy and their best medical judgment at the time of the request for transport. AMPA supports that a receiving physician or the transport program medical director may complete the Certificate of Medical Necessity on scene transports.

AMPA does not support the use of discharge ICD-9 or 10 codes or other methodologies that retrospectively determine medical appropriateness of acute coronary syndromes, as this may adversely restrict access to appropriate care and may contradict the intent of EMTALA regulations. AMPA also believes that retrospective determination of medical appropriateness also negates the regional, environmental level of prehospital care and situational issues that are important factors at the time of transport in determining medical appropriateness for air medical transport in acute STEMI and possible STEMI patients.

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