

Circular No. (2) 2022

Date: 19 January 2022

To: All health care facilities in Bahrain.

Subject: Mohamed Bin Khalifa Cardiac Centre Announcement

Mohamed Bin Khalifa Cardiac Centre in Awali (MKCC-Awali) is a **specialist tertiary cardiac referral centre**. As part of the National STEMI Program, all residents (Bahraini and non-Bahraini) with acute STEMI (ST Elevation Myocardial Infarction) will be accepted for Primary PCI (PPCI) commencing January 1st, 2022. **(Please see attached pathway)**. All these patients are accepted by the CTC (Cardiac Transfer Clinic) via ambulance transfer only.

The following are the inclusion criteria for patient acceptance into MKCC-Awali:

1. The CTC will accept patients for referral /admission via **ambulance transfer only**.
2. All appropriate STEMI patients that require intervention will be accepted for emergency PPCI as part of the National STEMI Program and via the STEMI hotline from **all health care facilities** on the island (**Bahraini and non-Bahraini**).
3. Other acute cardiac emergencies from **secondary care hospitals** (BDF, KHUH, SMC etc) that require emergent tertiary intervention will be transferred via ambulance and will need to be discussed and accepted by the MKCC consultant on-call
4. Urgent primary and **secondary care facility** referrals for patients requiring further tertiary care will undergo transfer via ambulance once accepted by the MKCC consultant on-call after discussing the case and reviewing the ECG.

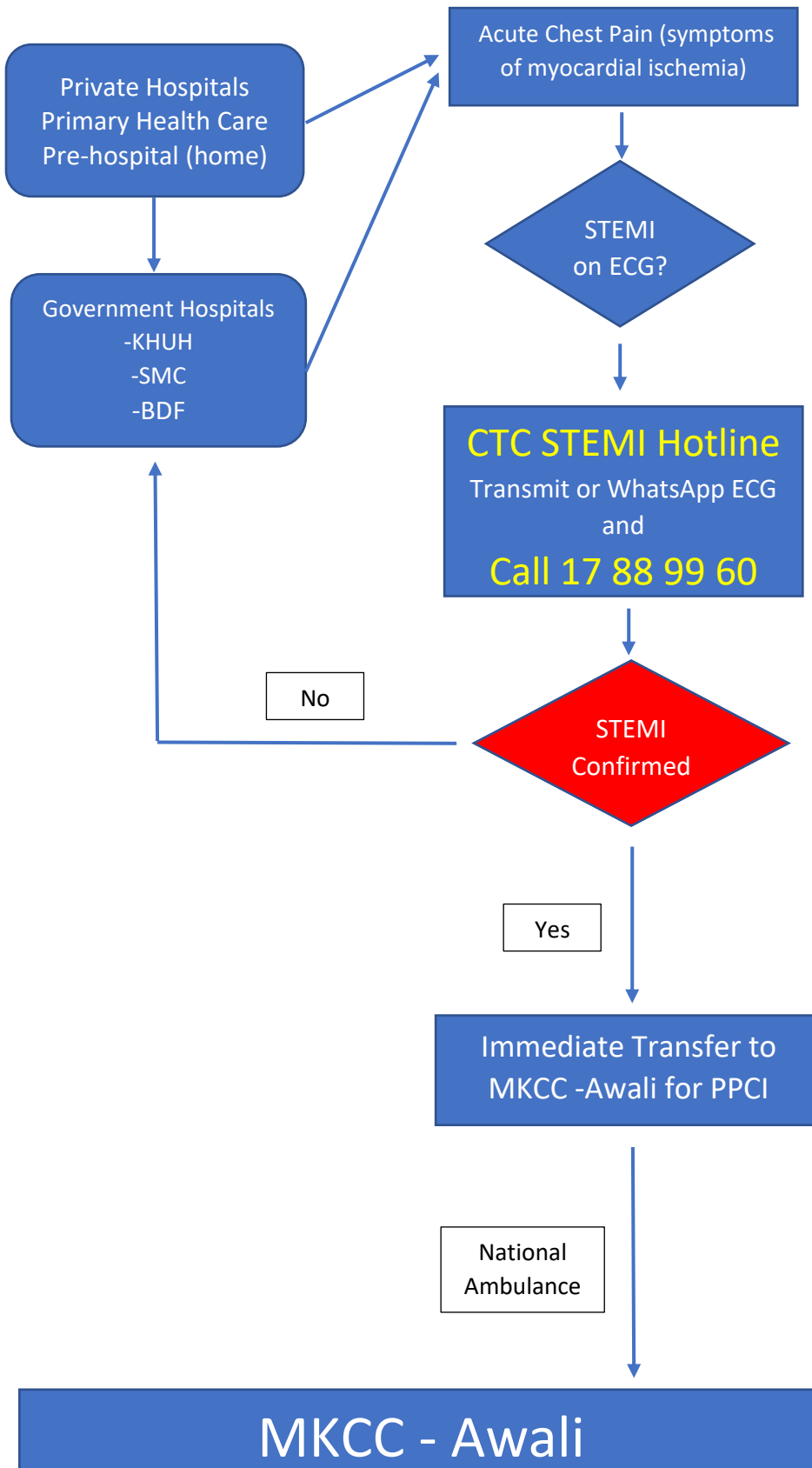
The following are the exclusion criteria for patient presentation to MKCC-Awali:

Patients should not be directed to present by himself/herself to MKCC-Awali CTC.



Dr. Mariam Athbi Al Jalahma
Chief Executive Officer

MKCC STEMI Transfer Protocol.



Symptoms of Myocardial Ischemia

Pain or tightness in chest, jaw, shoulders, arms, or epigastrium associated with dyspnea, diaphoresis, palpitations, or syncope.

ECG STEMI Criteria

Ongoing chest pain > 30 minutes AND ST Elevation 1mm or more in 2 adjacent leads except V2-V3 which require:

- 2.5 mm in men < 40 years
- 2.0 mm in men > 40 years
- 1.5 mm or more in women

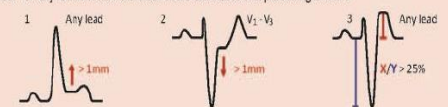
OR

1. LBBB and hemodynamically unstable
2. LBBB with modified Sgarbossa criteria
3. Posterior infarct: ST depression V1-V3 (need posterior ECG)

ECG STEMI Equivalents: for Reperfusion

Diagnosis of STEMI in Left bundle branch block (LBBB) using modified Sgarbossa criteria

1. Any lead with > 1mm concordant ST elevation (QRS and ST in same direction)
- OR 2. Any lead in V₁-V₃ with > 1mm concordant ST depression (QRS and ST in same direction)
- OR 3. Any lead with ST elevation more than 25% of a preceding S wave



New onset LBBB in a stable patient with chest pain is no longer an indication for reperfusion. Urgent reperfusion is indicated if LBBB AND a strong clinical suspicion of ongoing ischaemia.

Posterior infarct

- a. R wave greater than S wave in V₁-V₂
- b. ST depression V₁-V₂ on standard ECG
- c. ST elevation V₇-V₉ on posterior ECG

