

## **ADULTY CARDIOLOGY CONSULTS: Inpatient, Urgent Care or Emergency Department**

### **Preamble:**

- Two physicians are on call: **i) Code STEMI physician; ii) Adult Cardiology on Outside calls**
  - Subspecialty Adult Cardiology calls also include for differentiated consult requests: **i) Echo Cardiologist on call; ii) EP Cardiologist on call; iii) HF Cardiologist on call; iv) Interventional Cardiologist on call**
  - **VECTRS 204-949-4000** (Virtual Emergency Care and Transfer Resource Services) will begin coordinating calls for the STEMI Physician and Adult Cardiology on “Outside call” on Dec. 3, 2024. VECTRS also triages and prioritizes all ground and air inter-facility transfers (IFT’s) for the two dispatch centres.
  - The following are general guidelines only. Clinical judgement takes precedence when determining acuity and stability of patient (i.e. to determine if the consult is urgent/emergent or non-urgent).
  - Urgent/Emergent Adult Cardiology “On Call Service” for phone advice only. Would not replace formal consultation and/or diagnostic investigations if required.
  - Urgent/Emergent Code STEMI or Adult Cardiology “On Call” Service (24 hours/day) – SBH paging transfers any calls to VECTRS. On-call Cardiologist names are not provided to callers.
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## **ADULTY CARDIOLOGY CONSULTS coordinated by VECTRS**

As of: **December 3, 2024 at 08:00**

### **1. Cardiologists On-Call:**

- a. **Emergent and Urgent consult requests:** calls are coordinated by VECTRS
  - i. **STEMI physician**
  - ii. **Adult Cardiology on Outside Calls**
- b. **Stable +/- differentiated consult requests:** calls are not coordinated by VECTRS
  - i. **Echo Cardiologist**
  - ii. **Electrophysiology Cardiologist**
  - iii. **Heart Failure Cardiologist**
  - iv. **Interventional Cardiologist**

### **2. VECTRS (Virtual Emergency Care and Transfer Resource Services) provides the following services that are pertinent to Adult Cardiology:**

- |  | <u>date started:</u> |
|--|----------------------|
| a. <b>Inter-Facility Transfer (IFT) Triage and Prioritization:</b> | Nov 5, 2024          |
| i. <b>Ground and Air IFT - Provincial</b>                          |                      |
| b. <b>Paramedic (pre-hospital) on-line medical support (OLMS)</b>  | Nov 5, 2024          |
| i. <b>STEMI (paramedic calls)</b>                                  |                      |
| ii. <b>LVAD</b>  |                      |
| c. <b>Cardiology Consults - Emergent, Urgent Advice</b>            | Dec 3, 2024          |
| i. <b>STEMI (hospital calls - ED/UC/inpatient)</b>                 |                      |
| ii. <b>Adult Cardiology on Outside Call</b>                        |                      |

Level of Acuity	Cardiac diagnosis	Timeline to Response	Service
EMERGENT	STEMI	Available 24 hours/day	<p><b><u>OUTSIDE Winnipeg:</u></b></p> <p><b>PARAMEDIC calls (pre-hospital)</b></p> <ul style="list-style-type: none"> <li>call VECTRS for consult and transport: STEMI physician added to call</li> </ul> <p><b>HOSPITAL calls (ED, UC, inpatient)</b></p> <ul style="list-style-type: none"> <li>call VECTRS for consult and transport: STEMI physician added to call</li> </ul> <hr/> <p><b><u>INSIDE Winnipeg:</u></b></p> <p><b>HOSPITAL calls (ED, UC, inpatient)</b></p> <ul style="list-style-type: none"> <li>call <u>first</u> for emergent ambulance to: WFPS STEMI Hotline 204-986-2622</li> <li>WFPS transfers to VECTRS</li> <li>STEMI Physician added to call</li> </ul> <p>PARAMEDIC calls (pre-hospital)</p> <ul style="list-style-type: none"> <li>current process working: <ul style="list-style-type: none"> <li>call WFPS STEMI Hotline</li> <li>ECG transmitted directly from machine</li> <li>paramedic calls STEMI physician</li> </ul> </li> <li>education will be required decision made process to align with how calls will be handled outside Winnipeg on Dec 3</li> </ul>
EMERGENT	Unstable ACS Cardiogenic shock Severe heart failure Unstable arrhythmias	Available 24 hours/day	<p><b><u>OUTSIDE Winnipeg:</u></b></p> <p><b>HOSPITAL calls (ED, UC, inpatient)</b></p> <ul style="list-style-type: none"> <li>VECTRS called first by referring physician: <b>Adult Cardiology on Outside Calls added to call</b></li> <li>VECTRS will simultaneously arrange IFT to SBH: <ul style="list-style-type: none"> <li>depending on time/distance to SBH and transport mode: Transport Physician and transport team may be added to call</li> </ul> </li> </ul> <p><b><u>INSIDE Winnipeg:</u></b></p> <ul style="list-style-type: none"> <li>Victoria: call VECTRS</li> <li>Concordia, Grace, Seven Oaks: call Internist covering Cardiology</li> <li>HSC: call HSC Cardiology Consult Service</li> </ul>
EMERGENT	LVAD malfunction	Available 24 hours/day	<p><b><u>PROVINCE-WIDE:</u></b></p> <p><b>PARAMEDIC</b></p> <ul style="list-style-type: none"> <li>call VECTRS for consults and transport: LVAD Coordinator / HF Cardiologist added to call</li> </ul> <p><b>HOSPITAL calls:</b> continue to call SBH Paging</p>
URGENT ADVICE	Stable ACS Mild/moderate HF Stable arrhythmias	Available 24 hours/day	<p><b><u>OUTSIDE Winnipeg and Victoria Hospital</u></b></p> <p><b>HOSPITAL calls (ED, UC, inpatient)</b></p> <ul style="list-style-type: none"> <li>VECTRS called first by referring physician: <b>Adult Cardiology on Outside Calls notified</b> <ul style="list-style-type: none"> <li>will contact provider when available</li> <li>if IFT decision made by Cardiologist, VECTRS will arrange IFT</li> </ul> </li> </ul>

**STABLE CONSULTS - Rural**

<p><b>STABLE Expedited Outpatient</b></p>	<p>Chest pain syndrome CAD risk stratification New heart failure Possible severe valvular heart disease</p>	<p>Days to Weeks</p>	<ol style="list-style-type: none"> <li>1. Consult Community Adult Cardiologist directly for outpatient referral</li> <li>2. Contact Cardiac Sciences Program Hub Fax: 204-233-2157</li> <li>3. E-Consult</li> </ol>
<p><b>STABLE Outpatient</b> (majority of referrals)</p>	<p>Stable cardiac inquiries</p>	<p>Weeks to Months</p>	<ol style="list-style-type: none"> <li>1. Consult Community Adult Cardiologist directly for outpatient referral</li> <li>2. Contact Cardiac Sciences Program Hub Fax: 204-233-2157</li> <li>3. E-Consult</li> </ol>

**STABLE CONSULTS - Inside Winnipeg (Shared Health and WRHA):**

Level of Urgency	VGH	SOGH	Concordia	GGH	HSC
<p><b>STABLE Possible SBH Transfer and Admission</b></p>	<p><b>Call VECTRS:</b> Adult Cardiology on "Outside calls" notified</p>	<p>SOGH Internist covering Cardiology  (Internist calls SBH Adult Cardiology on Outside Calls if needed)</p>	<p>Concordia Internist covering Cardiology  (Internist calls SBH Adult Cardiology on Outside Calls if needed)</p>	<p>GGH Internist covering Cardiology  (Internist calls SBH Adult Cardiology on Outside Calls if needed)</p>	<p>HSC Cardiology Consult Service</p>
<p><b>STABLE Inpatient Consult Inpatient Unit</b></p>	<p><b>Call VECTRS:</b> Adult Cardiology on Outside Calls notified (0800-1700)</p>	<p>SOGH Internist covering Cardiology</p>	<p>Concordia Internist covering Cardiology</p>	<p>GGH Internist covering Cardiology</p>	<p>HSC Cardiology Consult Service</p>
<p><b>STABLE Early Outpatient Consult</b></p>	<ol style="list-style-type: none"> <li>1. Community Adult Cardiologist - consult directly for outpatient referral</li> <li>2. Contact Cardiac Sciences Program Hub (Fax: 204-233-2157)</li> <li>3. E-Consult</li> </ol>	<p>SOGH Internist covering Cardiology</p>	<p>Concordia Internist covering Cardiology</p>	<p>GGH Internist covering Cardiology</p>	<ol style="list-style-type: none"> <li>1. Community Adult Cardiologist - consult directly for outpatient referral</li> <li>2. Contact Cardiac Sciences Program Hub (Fax: 204-233-2157)</li> <li>3. E-Consult</li> </ol>

6-Jan-2025

**DEFINITIONS:**

Unstable ACS:	hemodynamic compromise severe HF and/or refractory ischemia
Stable ACS:	hemodynamically stable ischemic chest pain free +/- mild HF
Severe heart failure:	low blood pressure possible low cardiac output syndrome high O2 requirements
Mild-moderate heart failure:	hemodynamically stable no end organ issues low-moderate O2 requirements easily diuresing
Unstable Arrhythmia:	hemodynamic compromise concomitant heart failure ventricular tachycardia, prolonged ventricular pauses
Stable Arrhythmia:	hemodynamically stable afib/flutter, supraventricular tachycardias, AV blocks without prolonged pauses