

Aspirin

By Jim Moss

Indications:

- Administer to all patients with Acute Coronary Syndrome (i.e.-Chest pain, “pressure,” “squeezing,” “crushing,”) or any other symptoms that may suggest myocardial ischemia.
- Blocks blood platelet aggregation and arterial constriction
- Anti-inflammatory, analgesic, antipyretic, antiplatelet

Precautions/Contraindications:

- *Contraindicated* in patients with known hypersensitivity, hemophilia, pregnancy, nasal polyps, and chronic urticaria.
- *Relatively contraindicated* in patients with ulcers or asthma.

Dosing: *Adults*—324mg PO, supplied as 4 Children’s ASA chewable tablets (81mg each)

Scenario: 55 y/o Male c/o chest pain with associated dyspnea, nausea/vomiting x1 hour. Pt admits to “negative” cardiac stress test a few days ago. Pt rates his pain at 10 of 10, crushing in nature, radiating to jaw, non-palliated with rest. Vital Signs: 116/70, HR 80, SpO2 90% (RA), BG 140



Plan of care: 12-Lead ECG—Confirm Acute MI (Lateral ST-elevation=V5, V6, I, AVL)
Alert Hospital ED/Cath. LAB as soon as possible
Frequent Vital Signs
Oxygen therapy to maintain SpO2 greater than 92%
Obtain SAMPLE history to rule out contraindications
Aspirin 324mg PO
IV Access
Nitroglycerin 0.4mg SL every 5 minutes, max 3 doses
Morphine 2-4mg IVP
Zofran 4mg IVP or SL