

“Therapeutic Management of Acute Myocardial Infarction Patients as per JCI Guidelines”

Submitted By
Archana Singh
MBA-HM 19th Batch
Roll No. 0131

Under the Guidance of
Prof. Dhirendra Kumar

Introduction

- Cardiovascular diseases (CVDs) are the major cause of death globally, which are a group of disorders of the heart and blood vessels.
- There is increase in global mortality rate due to IHD (Ischaemic Heart Disease). In 2010, 7 million deaths occurred globally due to IHD.
- The incidence of STEMI is higher (60.6%) and the mortality is more (8.6%) in Indian population than that in developed countries.
- Risk factors include high blood pressure, smoking, diabetes, lack of exercise, obesity, high blood cholesterol, poor diet and excessive alcohol intake.

Quality Performance Measure for AMI

- Timely reperfusion
- Early aspirin administration
- Smoking cessation counseling
- ACE inhibitor for depressed left ventricular ejection fraction
- Beta blocker at discharge
- Aspirin at discharge
- Mortality

Aim and Objectives

Aim:

- To evaluate the drug therapy received by the acute MI patient in the hospital and incorporation of the JCI recommendation.

Objectives:

- To assess the existing clinical management of acute myocardial infarction as per JCI norms.
- To find the gaps and give suggestion to remove the non compliance in the path of JCI accreditation for the management of Acute Myocardial infarction cases.

Methodology:

- **Study design:** Retrospective study
- **Sample size:** 108
- **Data collection method:** Record and document review.
- **Data analysis :** M S Excel
- **Study duration:** 8th February 2016 to 6th May 2016.

Observations

Observations:
Adequate availability of aspirin stock and its 100% administration to the patient on arrival to the hospital

I-Acute Myocardial Infarction-1

I-Acute Myocardial Infarction (I-AMI)		
Measure Code	Measure Short Name	Measure Description
I-AMI-1	Aspirin at Arrival	Aspirin received within 24 hours of arrival to the hospital for patients having an acute myocardial infarction (AMI).

Observations:
Adequate availability of aspirin stock and its 100% administration to the patient on arrival to the hospital

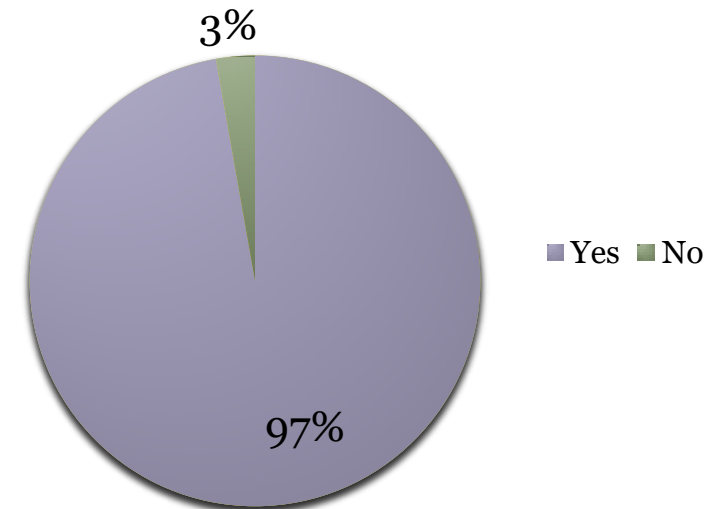
I-Acute Myocardial Infarction-2

Measure Code	Measure Short Name	Measure Description
I-AMI-2	Aspirin Prescribed at Discharge	Aspirin prescribed at discharge for patients who had an acute myocardial infarction.

Observations:

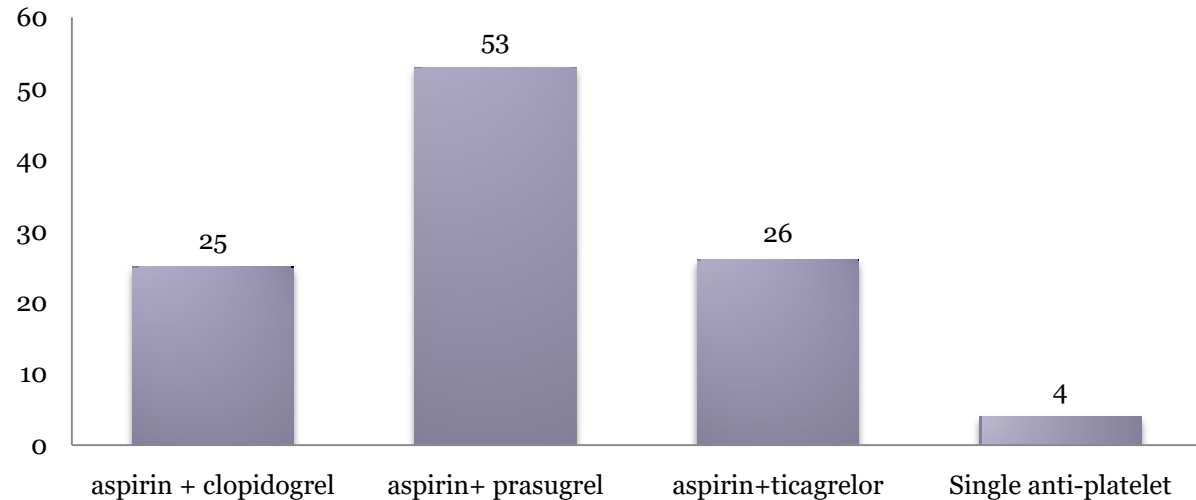
- Out of sample size of 108 patients, 105 patients received aspirin at the time of discharge i.e. about 97.2% Patients receiving the medication at discharge.

Aspirin at Discharge



Dual Anti platelet Therapy:

- Combinations of aspirin with other oral antiplatelet agents, such as clopidogrel, prasugrel or Ticagrelor provide enhanced antiplatelet effects for preventing recurrent events of MI.
- Findings show that out of 108 cases, 105 cases receive Aspirin at discharge whereas administration of Aspirin at admission is 100%
- Various combination are as under:

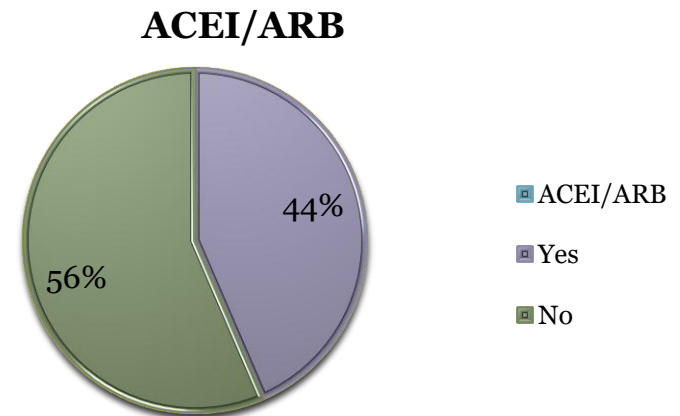


I-Acute Myocardial Infarction-3

Measure Code	Measure Short Name	Measure Description
I-AMI-3	ACEI or ARB for LVSD	ACEI (angiotensin converting enzyme inhibitor) or ARB (angiotensin receptor blocker) for patients who have LVSD (Left Ventricular Systolic Dysfunction) after having an acute myocardial infarction.

Observations:

Out of sample size of 108 patients, 47 patients received ACEI or ARB i.e. about 44% Patients get ACEI or ARB after having an acute myocardial infarction.



I-Acute Myocardial Infarction-4

Measure Code	Measure Short Name	Measure Description
I-AMI-4	Adult Smoking Cessation Advice/Counselling	Adult smoking (cigarette) cessation advice/counselling given to patients who had an acute myocardial infarction.

Observations:

- No records of Adult smoking (cigarette) cessation advice/counselling given to patients who had an acute myocardial infarction.

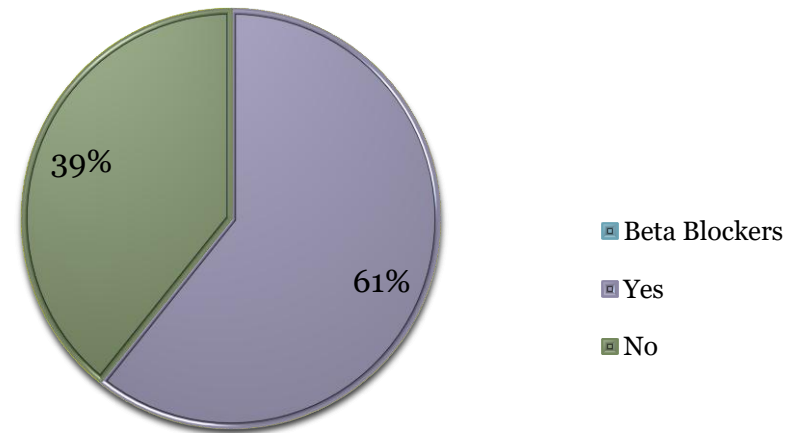
I-Acute Myocardial Infarction-5

Measure Code	Measure Short Name	Measure Description
I-AMI-5	Beta Blocker Prescribed at Discharge	Beta-blocker prescribed at discharge for patients who had an acute myocardial infarction. .

Observations:

- Out of total 108 patients of myocardial infarction , 65 cases were prescribed beta-blockers at the time of discharge

Beta Blockers



Observations:
Out of total 108 patients of myocardial infarction, 8 cases expired during the hospital stay

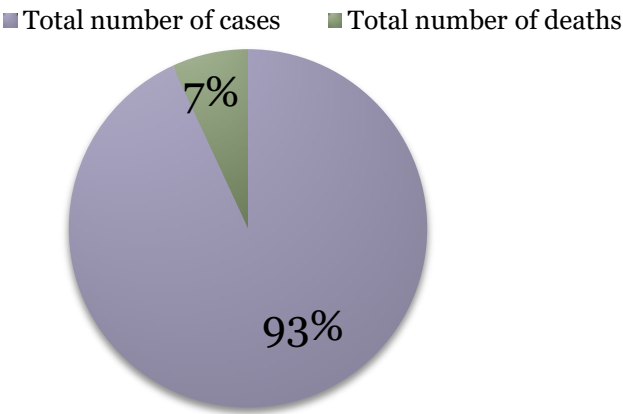
I-Acute Myocardial Infarction-9

Measure Code	Measure Short Name	Measure Description
I-AMI-9	Inpatient Mortality	Acute myocardial infarction (AMI) patients who expire during the hospital stay

Observations:

Out of total 108 patients of myocardial infarction, 8 cases expired during the hospital stay

Inpatient Mortality



SUGGESTIONS:

- As hospital is going for JCI accreditation it should strictly follow the JCI guidelines.
- Create smoking cessation awareness among MI patient and maintain record, because it's a important factor for a treatment to be successful.
- As the study suggested combination of all 3 drugs (ACEI, Beta Blocker and Dual antiplatelet) for a patient should be given.
- With the appropriate use of drug therapy, mortality rate can be further reduce.

Conclusion:

JCI norms are important for international accreditation of the hospitals. Assessing the facility and removing the non-compliance can help in getting the accreditation done.

As cleared from the study, prescribing Beta-Blockers at discharge and counseling for smoking cessation to the acute myocardial infarction patients can reduce the incidence of infarction and its related complications. This can also reduce the rate of re-infarction cases, thus helping the hospital to be JCI accredited.

Thank
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