

EMS Council STEMI Alert Dashboard	Benchmark			FY23 Results	FY22 Results
McHenry- Primary PCI Facility		Sep-22	Oct-22		
Total STEMI Alerts		5	10	15	88
Total STEMI		3	2	5	55
Patients Called 911		3	4	7	56
STEMI Patients Arriving by EMS		2	0	2	39
EMS Alerts called in Field		3	1	4	41
%EMS Alerts Cancelled		33.3%	100%	50.0%	14.6%
Numerator		1	1	2	6
Denominator		3	1	4	41
EMS contact to 12 Lead (median time)	5 min ³	7	3	5	5
EMS contact to STEMI Alert (median time)		12	15	14	14
EMS STEMI EKG to STEMI Alert (median time)	15 min ⁴	8	14	11	11
Door to Thrombolytic agent (median time)	≤ 30 min ²	N/A	N/A	N/A	N/A
Door to Device (median time)	≤ 60 min ¹	31	70	51	58
% of Door to Device in ≤ 90 minutes	93.1% ⁴	100%	100%	100%	97.9%
Numerator		2	2	4	47
Denominator		2	2	4	48
EMS Contact to Device (median time)	≤ 90 min ²	60	N/A	60	75
%EMS Contact to Device in ≤ 90 minutes	50.43% ¹	100%	N/A	100%	85.3%
Numerator		2	0	2	29
Denominator		2	0	2	34
Huntley- Primary PCI Facility		Sep-22	Oct-22		
Total STEMI Alerts		5	5	10	71
Total STEMI		5	2	7	42
Patients Called 911		4	3	7	43
STEMI Patients Arriving by EMS		4	1	5	22
EMS Alerts called in Field		3	3	6	24
%EMS Alerts Cancelled		0%	0%	0%	12.5%
Numerator		0	0	0	3
Denominator		4	3	7	24
EMS contact to 12 Lead (median time)	5 min ³	3	7	5	7
EMS contact to STEMI Alert (median time)		12	9	11	15
EMS STEMI EKG to STEMI Alert (median time)	15 min ⁴	6	2	4	12
Door to Thrombolytic agent (median time)	≤ 30 min ²	N/A	N/A	N/A	N/A
Door to Device (median time)	≤ 60 min ¹	61	65	63	59
% of Door to Device in ≤ 90 minutes	93.1% ⁴	100%	100%	100%	97%
Numerator		4	2	6	36
Denominator		4	2	6	37
EMS Contact to Device (median time)	≤ 90 min ²	74	76	75	77
%EMS Contact to Device in ≤ 90 minutes	50.43% ¹	100%	100%	100%	69.2%
Numerator		3	1	4	9
Denominator		3	1	4	13
Woodstock- Referral Facility		Sep-22	Oct-22		
Total STEMI		1	0	1	4
Door-in-Door-out (median time)	≤ 30 min ¹	57	na	57	47
%STEMI Door-In-to-Door-Out in ≤ 30 minutes	50% ¹	0%	na	0%	0.0%
Numerator		0	na	0	0
Denominator		1	na	1	3
† No data available * Preliminary Data 1. Internal goal set by Chest Pain Committee 2. Chest Pain - MI Registry Quality Metric goal 3. Region IX ACS SOP 2019-2020 4. US Hospitals Chest Pain - MI Registry Performance 2020 R4Q Details Report					