

Freedom of Information Request	FOI 22-189	12 th May 2022
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We are undertaking a piece of work to better understand if Trusts have policies and / or procedures in place for the management of patients with chest pain, suspected aortic dissection and diagnosed aortic dissection. From this we hope to produce a standard policy/procedure for the NHS.

We would therefore like to submit a FOI request for the following information:

1. Do you have a policy and/or written procedures for how your trust responds to patients presenting at A&E with chest pain or suspected heart related conditions?

Yes, the Health Board has the Chest Pain pathway. The pathway for accessing Primary percutaneous coronary intervention (PCI) both at Grange University Hospital during hours and the University of Wales Hospital out of hours.

The Health Board also has a policy for thrombolysis of acute MI's to be used in any patient where there is a transfer delay to accessing primary PCI.

2. Do you have a policy and/or written procedures for managing suspected aortic dissection?

The Health Board does not have a departmental guideline but follow the RCEM "Think Aorta" campaign and the associated RCEM/RCR Best Practice Guideline. The department works closely with colleagues in radiology to ensure effective investigation of patients with suspected aortic dissection (AD).

3. Do you have a policy and/or written procedures for managing aortic dissection once diagnosed? Please provide a copy of these

The Health Board does not have a written treatment policy as the management would depend on the anatomical site and type of dissection. We would instead emphasise early involvement of the appropriate specialty team or teams (which may be off site). These may include vascular surgery, cardiothoracic surgery, critical care, cardiology. This is augmented through consultant presence on the "shop-floor" from at least 0800 - 0000 7-days a week and 24/7 middle-grade cover.

4. If you have a policy or procedures in place regarding aortic dissection, what is the trust's process for ensuring that all clinical staff are made aware and are reminded?

Please refer to Q2 and Q5.

5. If you provide training, please provide a copy of the training material. Do you have any training/induction to ensure that all staff are familiar with it?

- a) Induction- covered as part of talk on medicolegal pitfalls in the Emergency Department (ED)
- b) Monthly M&M meetings- open to all staff. In the last year, Aortic dissection featured in 10 meetings, an example from the April 2021 meeting is attached.
- c)
 - Case of the day teaching at handover (case 20 attached)
 - Case of the week teaching (via posters in and around dept)
 - WhatsApp teaching discussion group (GUHSHOrTs)
 - We also share RCEM safety alerts (at least one has highlighted aortic dissection)