



## "PROBLEMS IDENTIFICATION AND IT'S MANAGEMENT OF AMI AND ACS PATIENTS IN THE EMERGENCY DEPARTMENT OF CORPORATE HOSPITAL"

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**SNEHASIS SINHA ROY**  
Research Scholar, Institute of Management Study, Kolkata

[Snehasisroy338@gmail.com](mailto:Snehasisroy338@gmail.com)

**DR. MUSTAK AHMED**

[Mustak6699@gmail.com](mailto:Mustak6699@gmail.com)

### ABSTRACT:

Cardiovascular disease (CVD) is defined as any disease of the heart and its associated blood vessels, most commonly coronary heart disease (CHD), stroke, and peripheral vascular disease. In coronary heart disease the blood circulation of the heart muscle is inadequate; this is caused by a narrowing or blockage of one or more coronary blood vessels. A major complication related to (CHD) is acute myocardial infarction (heart attack). This paper try to identify the position **how to manage** it during emergency condition in corporate hospital.

**Key words:** - 1. Cardiovascular disease, 2. Myocardial infarction, 3. Management,

4. Corporate Hospital,

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### 1.1 INTRODUCTION:

#### Acute Coronary Syndrom (ACS)

The term acute coronary syndrome(ACS) refers to any group of clinical symptoms compatible with acute myocardial ischemia and includes unstable angina (UA), **non-ST-segment elevation myocardial infarction (NSTEMI), and ST-segment elevation myocardial infarction (STEMI).**

ACS is caused by the accumulation of fatty deposits or plaque in the blood vessels. These deposits restrict the flow of oxygen and nutrients to the hear. If a plaque formation ruptures and a blood clot forms, then blood flow to the heart can be shut off altogether.

Heart disease can lead directly to acute coronary syndrome, but those who do not have heart disease can protect themselves by practicing a healthy lifestyle. Following a heart-

healthy diet: Eating a diet that includes fruits, vegetables, whole grains, and lean protein.

#### ACUTE MYOCARDIAL INFARCTION (AMI):

Acute myocardial infarction necrosis resulting from acute obstruction of a coronary artery. Symptoms include chest discomfort with or without dyspnea, nausea, and /or diaphoresis. Diagnosis is a electrocardiography (ECG) and the presence or absence of serologic makers.

A Heart attack is also known as a myocardial infarction:

The three types of heart attacks are :

- ST segment elevation myocardial infarction (STEMI)
- Non-ST segment elevation myocardial infarction (NSTEMI)
- Coronary spasm, or unstable angina.



## PREVENTION OF MYCARDIAL INFARCTION:

Lifestyle Changes:

1. Stop smoking, if you smoke quit....
2. Choose good nutrition. A healthy diet is one of the best weapons  
you have to fight cardiovascular disease..
3. High blood cholesterol ..
4. Lower high blood pressure...
5. Be physically active every day..
6. Aim for a healthy weight....
7. Manage diabetes ...
8. Reduce stress.

### 1.2 REVIEW OF LITERATURE:

- **Review of Literature of Acute Coronary Syndrome:**

The term ACUTE CORONARY SYNDROM (ACS) forms a part of the continuum of disease pathologies that falls under CORONARY HEART DISEASE (CHD), CHD a worldwide health epidemic, includes chronic CHD, acute coronary syndromes and sudden death. Acute coronary syndrome (ACS) is a unifying term which represents the common end result, acute myocardial ischemia. Acute ischemia is usually, but not always, the result of atherosclerotic plaque rupture, fissuring, erosion, or a combination of these with superimposed intracoronary thrombosis and is mostly associated with an increased risk of cardiac death and myonecrosis. Patients with acute coronary syndrome (ACS) commonly are generally classified into two groups to aid largely in the evaluation and management, namely patient with acute myocardial infarction with ST – segment elevation (STEMI) on their presenting electrocardiogram (ECG) and patients with non-ST –segment elevation acute coronary syndrome (NSTEMI-ACS), NSTEMI-ACS includes patients with non-ST-segment elevation myocardial infarction (NSTEMI), when the injury is sufficiently severe to cause myocyte necrosis.

- **Review of Literature of Acute Myocardial Syndrome:**

In this nationally representative cross-sectional study, it was found that nearly 6% of individuals, or an estimated 13.5 million adults nationally, were not aware of a single symptom of AMI and nearly 1 in 12 individuals, or an estimated 19.1 million adults nationally, did not consider chest pain or discomfort AMI symptom. These numbers were substantially higher for individuals who were non-Hispanic black or Hispanic, were not born in the United States, had lower education levels, were uninsured, and belonged to the low-income and lowest-income subgroups. Among individuals having all these characteristics, 1 in 5 were not aware of any symptom of AMI.

### 1.3 RESEARCH METHODOLOGY

PLACE OF STUDY:

**B. M. BIRLA HEART RESEARCH CENTRE, KOLKATA**

1.1 National Library Ave, Alipore, Kolkata, West Bengal 700027

DURATION OF STUDY : - December, 2021 to March 2022

SPECIALISED DEPARTMENT : - Medical Administration

SOURCES OF DATA : -

There are two sources of data collection.

PRIMARY DATA :-

- Direct observation
- Questionnaire

SECONDARY DATA:-

- Information from hospital website

SAMPLING METHOD: - Convenience sampling

DATE ANALYSIS TECHNIQUE:

Collection of data through Medical Admin department.

STEPS INVOLVED: -Data Collected from patient area, co-ordinator desk and then they are analyzed

- Compilation of collected data is then tabulated and depicted.

Sample Size: 75



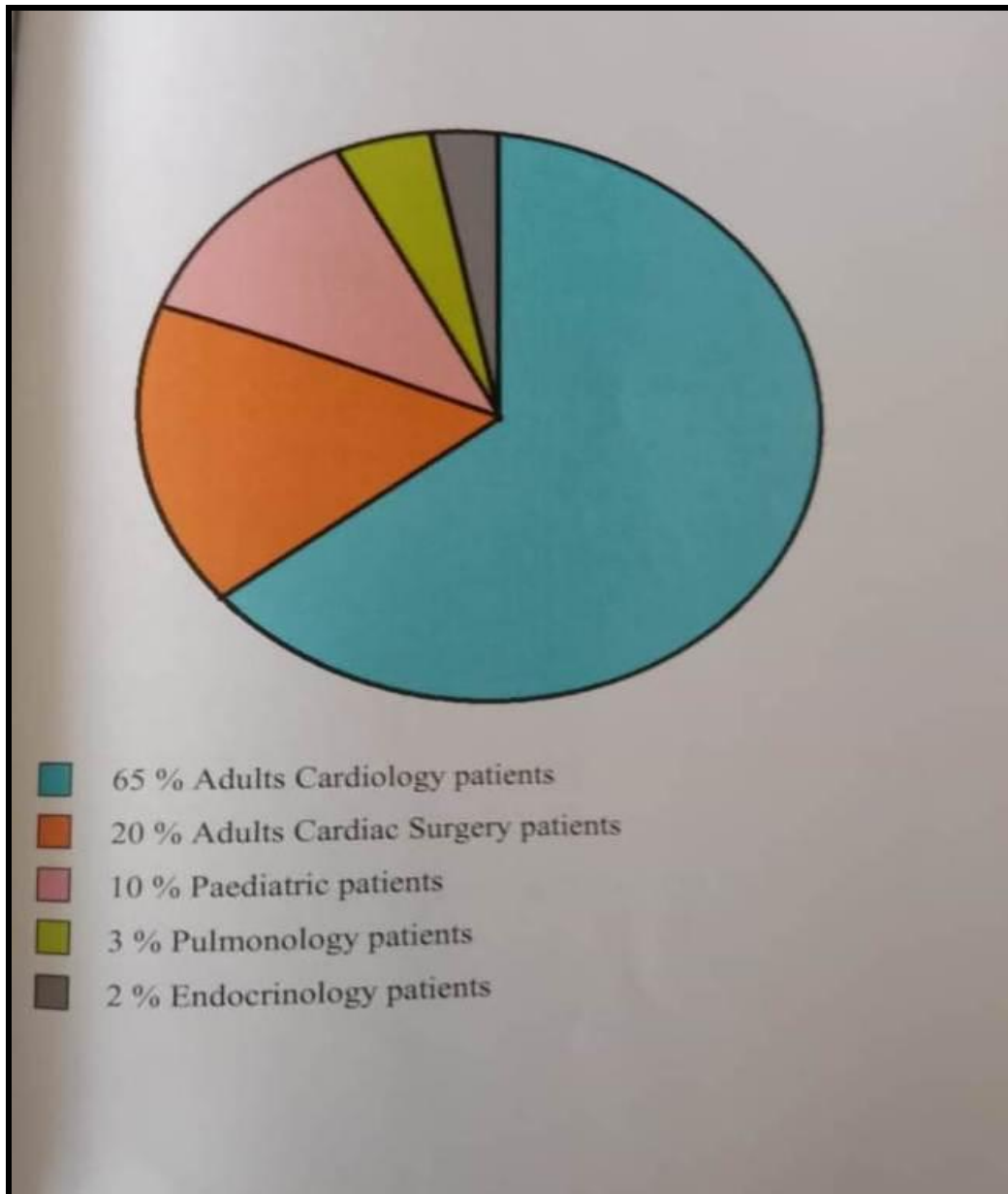
#### 1.4 DATA ANALYSIS AND INTERPRETATION

#### Interpretation:-

The above patients distribution are 65% Adults Cardiology patients, 20% Adults Cardiac patients, 10% Paediatric patients, 3% Pulmonology patients, 2% Endocrinology patients

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## CONCLUSION

I have worked in B M Birla Heart Research Centre, New Alipore, Kolkata as a Research Scholar under the MEDICAL ADMINISTRATION Department under the guidance of Dr. Prasenjit Bhaumik (Assistant Medical Superintendent) and Dr. Mustak Ahmed (Guide).

During my thesis I have learned a lots of things. I collected various data on the basis of Medical Admin Department. I also came to know about

various factors associated with this, I came to know about various different rules and regulation as well as some of the procedure of particular department.

All the management team and the employees coordinate with me very well and they help me a lot during the time.

I shall be grateful if this study and findings prove beneficial to the hospital services anyway.



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