

From hours to minutes: Prompt PE activation



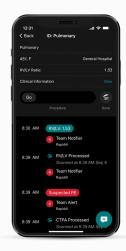
Patient Background

- 45y/o Female
- Partial bowel resection for perforated diverticulitis 4 months prior
- Awoke that morning w/severe acute dyspnea
- Recurrent syncope x2











"Rather than the ER doctor managing the critical illness, needing to figure out who to call, at 8:41 am, one of the PERT team interventional cardiologists called the ER."

Dr. Peter MonteleoneInterventional Cardiologist, Austin, TX





8:30 am

Arrived at Dell Seton Medical Center

8:30 am

- BP 70/50, HR 150
- O2 sat: 70% @NRB

8:39 am

- CTPA scan completed
- Rapid PE alert received

8:41 am

- PERT IC contacted ER about the patient
- Administered vasopressors as patient's BP continued to drop (BP 60/50, HR 150)
- Ordered systemic tPA
- Activated mobile ECMO

8:51 am

- Patient went into cardiac arrest
- tPA was administered during arrest
- Pulse returned but persistent hypotension
- ECMO team and IC were in transit

10:00 am

- Thrombectomy procedure performed
- Hemodynamics immediately improved (MAP to 80)