Nurse Administered Thrombolysis (NAT)

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WHAT IS A HEART ATTACK?

A heart attack is caused by a sudden blockage in blood flow to part of the heart (usually by a blood clot in an artery).

If the heart muscle does not get enough blood and oxygen some of the heart muscle can become damaged.

If the blockage can be opened quickly there will be less damage to the heart, which is why it is important to get help as soon as possible.

CAN I BE TREATED WITHOUT A DOCTOR?

If it is likely that you are having a heart attack a nurse will record the electrical activity of your heart (ECG).

In the past a doctor had to be with a patient to see the ECG and diagnose a heart attack. Now a new service allows the ECG to be quickly sent electronically to a specialist doctor who may be many kilometres away.

This doctor can identify if you are suffering from a heart attack and treatment can be quickly started using Nurse Administered Thrombolysis (NAT).



PATIENT FACT SHEET

What is Nurse Administered Thrombolysis (NAT)?

If the doctor confirms you are suffering from a heart attack and are suitable for this treatment, a specially trained nurse will give you medicine to dissolve the blood clot and open the blockage. This is known as Nurse Administered Thrombolysis (or NAT for short). This is used in some small hospitals where a doctor is not available 24 hours a day.

Can treatment wait until the doctor arrives at the hospital?

It is important to restore blood flow to the heart muscle as soon as possible. This reduces damage to the heart.

After speaking to the doctor, the nurse is able to quickly start treatment so that there is no delay in treating you and you are more likely to recover quickly.

Are there any side effects from the medicine?

The medicine used to dissolve blood clots can cause side effects such as bleeding, stroke or allergic reactions.

The nurse will discuss the risks with you before the medicine is given and you will be carefully watched in case you do have any side effects.

The likely benefits of using these medicines are generally much greater than the risks of potential harm for someone having a heart attack.



What if I am not suitable for NAT?

If you are not able to have the medicine to dissolve the blood clot, there are other treatments available.

The nurse will discuss options with the doctor to find the right treatment for you.

What happens during NAT?

You will be asked a series of questions to see if you are suitable for the clot dissolving medicine.

You will also be asked your age and weight to determine the right dose for you.

You will then be given three medicines. These include tablets (clopidogrel) and, depending on your age, two injections through a needle (IV) into your vein (tenecteplase and enoxaparin).

You will also be given a small needle under the skin of your stomach (more enoxaparin).

What can I expect after I have the medicine?

After you have had the clot dissolving medicine your blood pressure and heart rate will be carefully watched to see if the treatment is working and in case you have any side effects.

You may also be transferred to a larger hospital in case you need further treatment.

What if I want more information?

If you need more information, please do not hesitate to ask the nurse looking after you or visit **www.aci.health.nsw.gov.au**