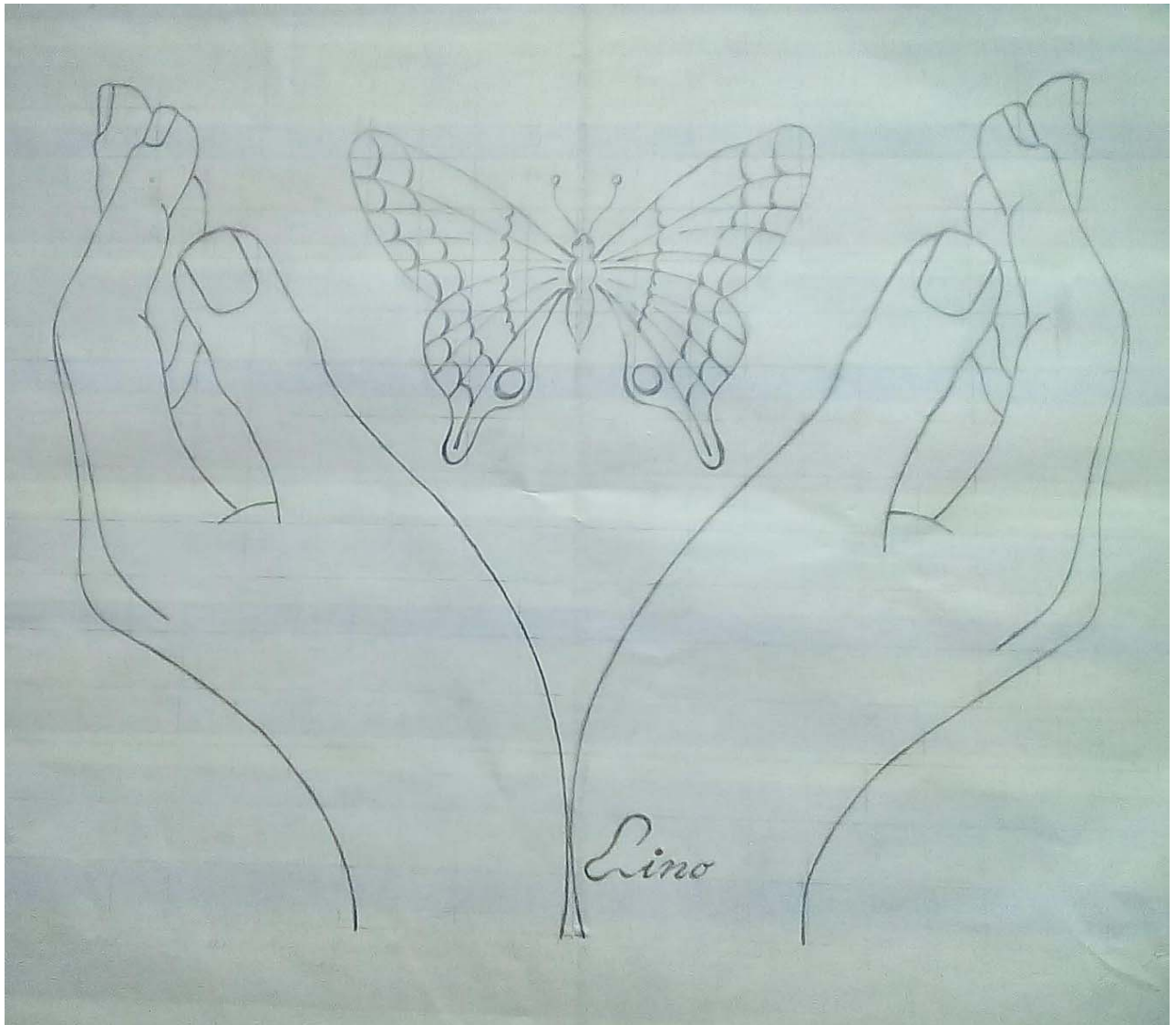


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## **The passim project: Acute Coronary Syndrome and Aortic aneurysm.**

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**\* PASSIM PROJECT: CAVALIERI DI MALTA, ITALY**

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**KEYWORDS:** **passim project, Acute Coronary Syndrome, Aortic aneurysm.**

### **CASE REPORT**

On 07/11/2021 at 2:20pm NEMO 9 took off for MEDEVAC from the English-flagged cruise ship "Spirit of Adventure" approximately 20 nautical miles south-east from Capo Spartivento (Calabria). A single air rescuer was hoisted to the scene to recover a patient. The rescuer carried out the recovery of patient B.R.F. (born in England on 30/12/1945) by placing him on a stretcher and arranged for his safe return aboard the helicopter. The flight continued in the direction of the Messina Polyclinic. Patient B.R.F. was subjected to a rapid Covid test. Supportive oxygen therapy was then set up and venous access was positioned. The rapid covid test provided a negative result for Sars-Cov2. Upon arrival at the emergency room, the Troponin Test provided a positive result. The emergency room therefore proposed the following diagnosis for hospitalization: "cardiocirculatory instability with suspected AMI in a patient with a previous clinical history of atrial fibrillation, pacemaker wearer, undergoing personal home cardiology therapy with beta-blockers, antihypertensive diuretics and digoxin. Persistent abdominal pain." The rescue team, arriving on board the cruise ship "Spirit of Adventure" assessed the patient's parameters. The measured blood pressure was 70/40 mmHg, heart rate was 60 bpm. The respiratory rate was 15 breaths per minute. Blood oxygen saturation was 92% during oxygen therapy as reported in table 1. Nursing care was performed on board the cruise ship "Spirit of Adventure" with placement of venous access for hemodynamic stabilization in a hypotensive patient. Placement of a bladder catheter for monitoring diuresis. At the beginning of treatment

the patient showed an increase in blood pressure reaching 90/60 mmHg, but subsequently suffered a reduction to 66/40 mmHg. An infusion of dopamine was then performed in addition to saline solution with a dosage of 5 ml/h. Due to the persistence of low blood pressure values, the infusion rate was increased to 7.5 ml/h. At follow-up, blood pressure stabilized at 82/54 mmHg, oxygen saturation was 94% during oxygen therapy. Once the hemodynamic parameters were stabilized, antibiotic therapy was administered with 2 g of ceftriaxone plus 500 ml of 0.9% saline and perfalgan 1000 mg tablets orally. Laboratory tests showed blood glucose 160 mg/dl, creatinine 2.0 mg/dl, CRP 30.9 mg/L, Na 137 mmol/L, K 4.4 mmol/L Hb 14.3 g/dl, WBC 11,100/L, PLT 159,000 /L. On ECG: presence of atrial fibrillation arrhythmia with early aberrant condition. Left axis deviation. Complete left bundle branch block. The patient still required inotropic support for hemodynamic stabilization and therefore hospitalization was proposed. The patient were transported and assisted by ambulance to the General Emergency Department of the Hospital of Syracuse and placed in the red room, where he waited for the availability of a place in Coronary Intensive Care. At the end of the operations, the helicopter returned to the heliport of the city of Catania where it landed, ending the emergency service, at 4:40 pm local time.

On 08/11/2021 at 9:30 am, the Emergency Department of the Messina hospital was contacted and confirmed the presence of an acute myocardial infarction associated with a 12 cm aortic aneurysm. Patient was therefore transferred to the Vascular Surgery Department and entrusted to the appropriate surgical care.

**TABLE**

	<b>Registered data</b>	<b>Normal value</b>
<b>Arterial blood pressure (mmHg)</b>	70/40	120/80
<b>Respiratory Rate (acts/min)</b>	15	10-15
<b>State of consciousness</b>	Present	Present
<b>O2 blood Saturation (%)</b>	92	> 95
<b>Body Temperature (°C)</b>	36,3	< 37,5

**Tab. 1:** Parameters recorded at the time of rescue intervention.

**FIGURE**



Fig. 1 PASSIM PROJECTS. NEMO 9 ELICOPTER.

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