



**Rural Acute Non ST-Elevation Acute Coronary Syndrome (NSTEMI-ACS) Composite Score Criteria:**  
**At least 75% Compliance** (AHACAD85)

12 Lead ECG (Electrocardiogram)  
Within 10 Minutes of Arrival (AHACAD96)

Early Cardiac Troponin Results Within  
90 Minutes of Arrival (AHACAD95)

Risk Stratification of NSTEMI-ACS Patients (AHACAD101)

Low-Risk NSTEMI-ACS Follow Up Appointment (AHACAD100)

Intermediate-Risk NSTEMI-ACS Cardiac Testing (AHACAD99)

High-Risk NSTEMI-ACS Anticoagulant  
Administration Prior to Transfer (AHACAD97)

High-risk NSTEMI-ACS Transfer to  
Percutaneous Coronary Intervention (PCI)  
Center Within 6 Hours (AHACAD98)



Eight or more consecutive quarters  
and  $\geq 2$  STEMI and/or NSTEMI-ACS  
records annually



Four consecutive quarters and  
 $\geq 2$  STEMI and/or NSTEMI-ACS  
records annually



One calendar quarter and  
 $\geq 1$  STEMI and/or NSTEMI-ACS  
record per quarter

2026

**HOSPITAL RECOGNITION  
CRITERIA**

(based on 2025 data)

**Rural Acute ST-Elevation Myocardial Infarction (STEMI) Composite Score Criteria: At least 75% Compliance** (AHACAD84)

12 Lead ECG Within 10 Minutes of Arrival (AHACAD91)

STEMI-Positive 12 Lead ECG to Interfacility  
Transport Requested Within 10 Minutes (AHACAD94)

Aspirin on Arrival or Prior to Transfer (AHACAD90)

Arrival or Subsequent STEMI-Positive 12 Lead  
ECG to Transfer to PCI Center within 45 Minutes  
(Door-In/Door-Out) (AHACAD88)

IV Thrombolytic Therapy Within  
30 Minutes of Arrival (AHACAD89)

P2Y12 Receptor Inhibitor Administered  
Prior to Transfer (AHACAD92)

Anticoagulant Administered Prior to Transfer (AHACAD93)



American Heart Association.  
**Get With The Guidelines.**  
Coronary Artery Disease



**Eligible Hospitals**

Federally Designated Critical Access Hospitals or  
Short Term Acute Care Hospitals within Rural Urban  
Commuting Areas (RUCA) geographically classified  
as large rural, small rural or isolated.

