Myocardial infarction: measurement of ejection fraction

NICE indicator

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Indicator

The proportion of patients with acute myocardial infarction with measurement of left ventricular ejection fraction before discharge.

Indicator type

Network / system level indicator.

The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

This document does not represent formal NICE guidance. For a full list of NICE indicators, see our menu of indicators.

To find out how to use indicators and how we develop them, see our NICE indicator process guide.

Rationale

Assessment of left ventricular function by measurement of left ventricular ejection fraction (LVEF) is an important predictor of outcome in patients after a myocardial infarction. It also allows identification of patients who would benefit from specific treatment such as the use of aldosterone antagonists. LVEF should be assessed before discharge in all people who have had ST-segment elevation myocardial infarction (STEMI) or non-ST segment elevation myocardial infarction (NSTEMI).

Source guidance

- Acute coronary syndromes. NICE guideline NG185 (2020), recommendations 1.1.27 and 1.2.26

- Guidelines for the management of acute myocardial infarction in patients presenting with ST-segment elevation. European Society of Cardiology (2017).

- Guidelines for the management of acute coronary syndromes in patients presenting without persistent ST-segment elevation. European Society of Cardiology (2020).

Specification

Numerator: The number of patients in the denominator who had LVEF measured before discharge.

Denominator: The number of patients with discharged from hospital following an admission with acute myocardial infarction.

Calculation: Numerator divided by denominator, multiplied by 100.

Exclusions: Patients who died in hospital.

Data source: Myocardial Ischaemia National Audit Project (MINAP) dataset.

Minimum population: The indicator would be appropriate to understand and report on the performance of networks or systems of providers.

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