

## Chest pain overview

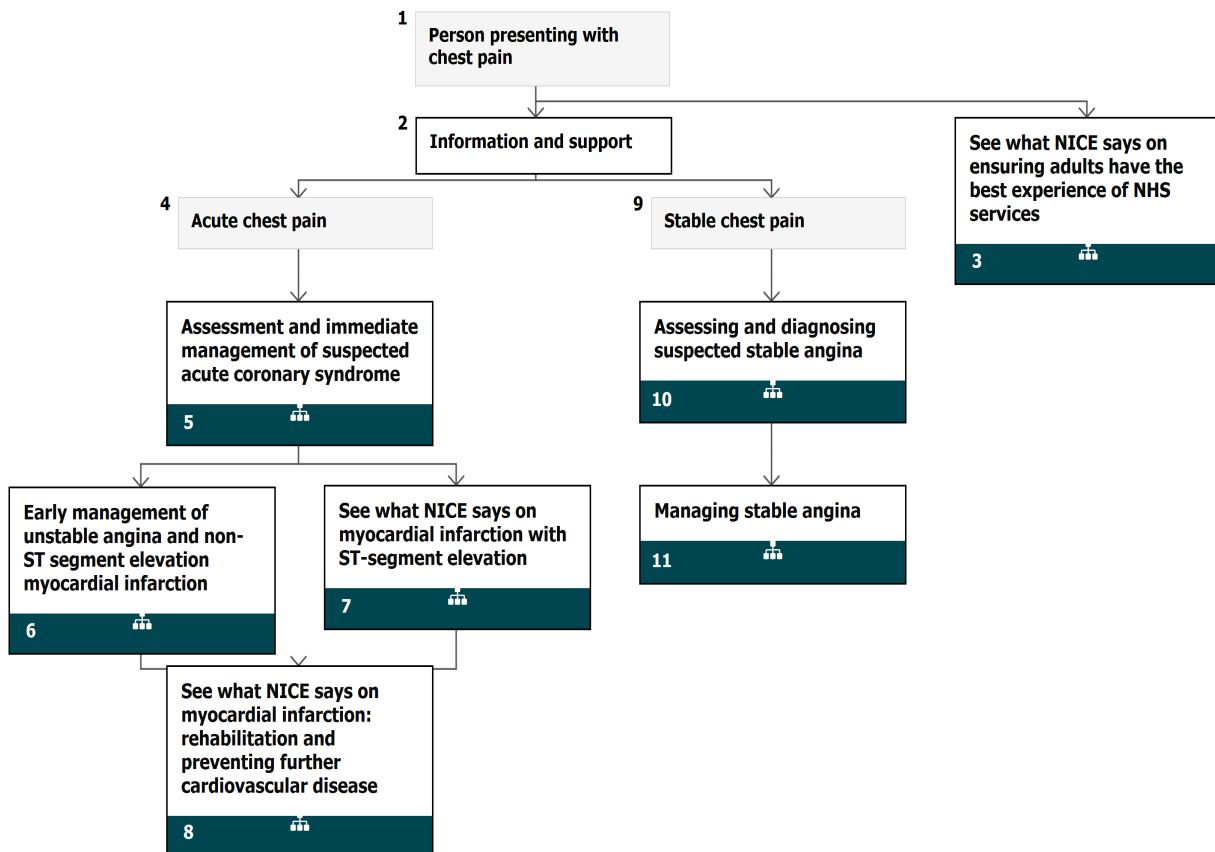
NICE Pathways bring together everything NICE says on a topic in an interactive flowchart. NICE Pathways are interactive and designed to be used online.

They are updated regularly as new NICE guidance is published. To view the latest version of this NICE Pathway see:

<http://pathways.nice.org.uk/pathways/chest-pain>

NICE Pathway last updated: 27 November 2018

This document contains a single flowchart and uses numbering to link the boxes to the associated recommendations.



## 1 Person presenting with chest pain

No additional information

## 2 Information and support

Discuss any concerns people (and where appropriate their family or carer/advocate) may have, including anxiety when the cause of the chest pain is unknown. Correct any misinformation.

Offer people a clear explanation of the possible causes of their symptoms and the uncertainties.

Clearly explain the options to people at every stage of investigation. Make joint decisions with them and take account of their preferences:

- Encourage people to ask questions.
- Provide repeated opportunities for discussion.
- Explain test results and the need for any further investigations.

Provide information about any proposed investigations using everyday, jargon-free language. Include:

- their purpose, benefits and any limitations of their diagnostic accuracy
- duration
- level of discomfort and invasiveness
- risk of adverse events.

Offer information about the risks of diagnostic testing, including any radiation exposure.

Address any physical or learning difficulties, sight or hearing problems and difficulties with speaking or reading English, which may affect people's understanding of the information offered.

Offer information after diagnosis as recommended in the relevant disease management guidelines. For example, see NICE's recommendations on [early management of unstable angina and NSTEMI](#) and [managing stable angina, dyspepsia and gastro-oesophageal reflux disease](#) and [generalised anxiety disorder](#).

Explain if the chest pain is non-cardiac and refer people for further investigation if appropriate.

Provide individual advice to people about seeking medical help if they have further chest pain.

NICE has written information for the public on [chest pain](#).

### **3 See what NICE says on ensuring adults have the best experience of NHS services**

[See Patient experience in adult NHS services](#)

### **4 Acute chest pain**

No additional information

### **5 Assessment and immediate management of suspected acute coronary syndrome**

[See Chest pain / Assessment and immediate management of suspected acute coronary syndrome](#)

### **6 Early management of unstable angina and non-ST segment elevation myocardial infarction**

[See Chest pain / Early management of unstable angina and NSTEMI](#)

### **7 See what NICE says on myocardial infarction with ST-segment elevation**

[See Myocardial infarction with ST-segment elevation](#)

### **8 See what NICE says on myocardial infarction: rehabilitation and preventing further cardiovascular disease**

[See Myocardial infarction: rehabilitation and preventing further cardiovascular disease](#)

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**9 Stable chest pain**

No additional information

**10 Assessing and diagnosing suspected stable angina**

[See Chest pain / Assessing and diagnosing suspected stable angina](#)

**11 Managing stable angina**

[See Chest pain / Managing stable angina](#)

**ACE**

angiotensin-converting enzyme

**BIS**

Bispectral Index

**CABG**

coronary artery bypass graft

**ECG**

electrocardiogram

**EEG**

electroencephalography

**GRACE**

Global Registry of Acute Coronary Events

**GTN**

glyceryl trinitrate

**MPS with SPECT**

myocardial perfusion scintigraphy with single photon emission CT

**NSTEMI**

non-ST-segment elevation myocardial infarction

**PCI**

percutaneous coronary intervention

**SPECT**

single photon emission CT

**STEMI**

ST-segment elevation myocardial infarction

**ST-T**

ST-segment-T-wave

**Sources**

[Chest pain of recent onset: assessment and diagnosis](#) (2010 updated 2016) NICE guideline CG95

**Your responsibility****Guidelines**

The recommendations in this guideline represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, professionals and practitioners are expected to take this guideline fully into account, alongside the individual needs, preferences and values of their patients or the people using their service. It is not mandatory to apply the recommendations, and the guideline does not override the responsibility to make decisions appropriate to the circumstances of the individual, in consultation with them and their families and carers or guardian.

Local commissioners and providers of healthcare have a responsibility to enable the guideline to be applied when individual professionals and people using services wish to use it. They should do so in the context of local and national priorities for funding and developing services, and in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities. Nothing in this guideline should be interpreted in a way that would be inconsistent with complying with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Technology appraisals**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, health professionals are expected to take these recommendations fully into account, alongside the individual needs, preferences and values of their patients. The application of the recommendations in this interactive flowchart is at the discretion of health professionals and their individual patients and do not override the responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or their carer or guardian.

Commissioners and/or providers have a responsibility to provide the funding required to enable the recommendations to be applied when individual health professionals and their patients wish to use it, in accordance with the NHS Constitution. They should do so in light of their duties to have due regard to the need to eliminate unlawful discrimination, to advance equality of opportunity and to reduce health inequalities.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.

### **Medical technologies guidance, diagnostics guidance and interventional procedures guidance**

The recommendations in this interactive flowchart represent the view of NICE, arrived at after careful consideration of the evidence available. When exercising their judgement, healthcare professionals are expected to take these recommendations fully into account. However, the interactive flowchart does not override the individual responsibility of healthcare professionals to make decisions appropriate to the circumstances of the individual patient, in consultation with the patient and/or guardian or carer.

Commissioners and/or providers have a responsibility to implement the recommendations, in



their local context, in light of their duties to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity, and foster good relations. Nothing in this interactive flowchart should be interpreted in a way that would be inconsistent with compliance with those duties.

Commissioners and providers have a responsibility to promote an environmentally sustainable health and care system and should assess and reduce the environmental impact of implementing NICE recommendations wherever possible.