



TASK Fill out the names and contact information of members of your ACS teams* and construct a team roster and group e-mail to help the team communicate.

**You may identify only 3 or 4 key personnel at the outset but may draft others onto the team as additional roster needs become clear.*

Task assignment _____

Timeline for forming team and calling first team meeting together _____

We recommend trying to enroll a range of personnel early, within 2–3 weeks

Acute Coronary Syndrome (ACS) Team Roster

Team leader (critical care) Name _____ E-mail _____
Phone _____ Pager _____

Team leader (wards) Name _____ E-mail _____
Phone _____ Pager _____

Team facilitator Name _____ E-mail _____
Phone _____ Pager _____

Content expert Name _____ E-mail _____
Phone _____ Pager _____

Local expert with expertise in the literature on inpatient ACS care, often a cardiologist or inpatient physician with extensive exposure to and interest in the topic.

Hospitalist 2 Name _____ E-mail _____
Phone _____ Pager _____

Hospitalist 3 Name _____ E-mail _____
Phone _____ Pager _____

Intensivist Name _____ E-mail _____
Phone _____ Pager _____



Internist/primary care physician Name _____ E-mail _____
Phone _____ Pager _____

Senior administrator Name _____ E-mail _____
Phone _____ Pager _____

Pharmacist Name _____ E-mail _____
Phone _____ Pager _____

QI staff representative Name _____ E-mail _____
Phone _____ Pager _____

Information/data pull Name _____ E-mail _____
Phone _____ Pager _____

Nurse supervisor Name _____ E-mail _____
Phone _____ Pager _____

Nurse (ward) Name _____ E-mail _____
Phone _____ Pager _____

Nurse (unit) Name _____ E-mail _____
Phone _____ Pager _____

Educator Name _____ E-mail _____
Phone _____ Pager _____

Nutrition/dietary Name _____ E-mail _____
Phone _____ Pager _____

Case manager Name _____ E-mail _____
Phone _____ Pager _____



Laboratory	Name _____	E-mail _____
	Phone _____	Pager _____
ED personnel (as needed)	Name _____	E-mail _____
	Phone _____	Pager _____
Unit clerks (as needed)	Name _____	E-mail _____
	Phone _____	Pager _____
Patient representative	Name _____	E-mail _____
	Phone _____	Pager _____
CPOE expert (if CPOE available)	Name _____	E-mail _____
	Phone _____	Pager _____

Your team roster may vary from this, and you should be flexible as you address different aspects of achieving optimal care for the inpatient with ACS.