

Rapid reperfusion of the infarct related artery is the cornerstone of therapy for the management of acute ST segment elevation myocardial infarction (STEMI). Canada's geography presents unique challenges regarding the choice and implementation of timely delivery of reperfusion therapy for STEMI patients. The Canadian Cardiovascular Society/Canadian Association of Interventional Cardiology STEMI Guideline was developed to provide advice regarding the optimal management of STEMI patients irrespective of where they are initially identified: in the field, at a non-PCI capable centre or at a PCI-capable centre. Using the Grading Recommendations, Assessment, Development, and Evaluation (GRADE) system, we provide specific evidence-based recommendations for the early identification of STEMI patients, practical aspects of patient transport, regional reperfusion decision making, adjunctive pre-hospital interventions and procedural aspects of mechanical reperfusion. Emphasis is placed on integrating these recommendations as part of an organized regional network of STEMI care and the development of appropriate reperfusion and transportation pathways for any given region. In addition, this is the first treatment guideline to evaluate sex and gender considerations in the development of Guideline Recommendations. It is hoped that these guidelines will serve as a practical template to develop systems of care capable of providing optimal treatment for a wide range of STEMI patients.