

Chest Pain (Not a Heart Attack)

Pain in your chest can be scary but it does not always mean you are having a heart attack. Your healthcare team has assessed you and done some tests and believe your chest pain is not coming from your heart.

There are many different causes of chest pain, including:

- Inflamed joints between the ribs and spine or breastbone.
- Sore muscles.
- Bruised, cracked or broken ribs.
- Pinched nerves.
- Stomach problems like heartburn, ulcer or gallbladder problems.
- Anxiety, panic attacks or depression.
- Breathing problems like infection (pneumonia), a blood clot, or inflamed lining around the lung (pleurisy).
- Heart problems like angina.

Some of these can be serious or become serious. Others are not a danger to you.



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When to Get Help

See your health care provider, go to a walk-in clinic or call 811 (711 for the hearing impaired) if:

- You have fever over 38.5°C (101.3°F).
- You are coughing up yellow-green mucus.
- Your chest pain comes and goes.
- You have a burning feeling in your throat when you swallow.
- Your pain is either worse with eating or gets better with eating.
- You have numbness or tingling in any part of your arm or hand.

Go to the nearest Emergency Department or Urgent Care Centre if:

- You have sudden crushing, squeezing, tightening, or pressure feeling in your chest.
- Your chest pain spreads to your back, neck, jaw, upper part of your belly or stomach, or down one or both shoulders or arms.

Recommended Follow-Up

Follow up in __ days.

Name of Provider

Reason

Date/Time

Location

Contact Info

- You have sudden, sharp pain in your chest with difficulty catching your breath.
- You have indigestion-like pain that gets worse with any activity.
- You cannot catch your breath.
- You feel sick to your stomach, feel dizzy, are sweating, or feel your heart racing.
- You feel your heart skipping beats, or your heartbeat is very fast or very slow.

To Learn More:

- Ask your health care provider.
- Ask your pharmacist.
- Go to HealthLinkBC - call 8-1-1 (7-1-1 for deaf or hard of hearing) or go online to www.HealthLinkBC.ca



How to Care for Yourself at Home

Medication

- For minor pain, use over-the-counter medications such as acetaminophen and ibuprofen (more information below) unless directed not to.



IBUPROFEN (E.G., ADVIL[®], MOTRIN[®])

- 200-400 mg every 6-8 hours as needed while awake, taken with a small snack (max: 1200mg/day).
- Avoid taking this medication for longer than 5-7 days. See your primary care provider if you need to use this for longer.
- Avoid this medication if you are more than 65 years old, pregnant, or have the following conditions: severe liver or kidney disease, peptic ulcer disease, or heart failure. Speak to your primary care provider before taking this if you have a history of stroke, GERD, inflammatory bowel disease, liver cirrhosis, or ischemic vascular disease.

Chest Pain (Not Heart Attack) Discharge Instructions - continued

ACETAMINOPHEN (E.G., TYLENOL®)

- 500-1000 mg every 4-6 hours as needed while awake, with water (max: 4000mg/day).

If you have liver disease or drink over 3 alcoholic beverages per day:

- Maximum dose: 3000mg per day.
- Do not use this medicine for longer than 5-7 days. Speak to your primary care provider if you need to use this for longer.

Be careful not to exceed the maximum dose when taking this medication with other medication that contain acetaminophen (e.g., Dayquil/Nyquil®).

Notes:

Additional Information

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Find this information sheet on the ECBC website:

https://emergencycarebc.ca/clinical_resource/patient-information-sheet/chest-pain-non-cardiac/

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bit.ly/pdsfeedback



The information in this document is intended solely for the person to whom it was given by the health care team. This information does not replace the advice given to you by your health care provider.

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