



Chest pain

You came to the emergency department with chest pain. The doctor examined you and did tests, such as a heart tracing (ECG) and blood tests. These did not show a dangerous cause today, so you can go home. This sheet explains what to do next.

What is it?

Chest pain has many causes. Many are not serious, such as strained chest muscles, acid reflux or anxiety. Today's tests are reassuring, but they cannot rule out every problem, especially heart problems that may show up later. That is why follow-up and knowing the warning signs matter. Sometimes the exact cause is never found.

Looking after yourself at home

- Rest today, then slowly return to your normal activities if you feel well.
- Avoid heavy exercise or heavy lifting until you have seen your doctor, unless you were told otherwise.
- Do not smoke. Stopping smoking is one of the best things you can do for your heart.
- If you were told the pain is from reflux, avoid large late meals, spicy and fatty food, and lying down straight after eating.
- Write down when the pain happens, what you were doing and how long it lasted. Show this to your doctor.

Medicines

- Take any medicines you were given exactly as your doctor told you.
- Keep taking your usual medicines unless your doctor told you to stop.

Follow-up

- See your family doctor or health centre within 2–3 days, or sooner if you were asked to.
- Go to any heart or other appointments that were booked for you, and ask about checking your blood pressure, cholesterol and sugar.

Come back to the emergency department or call an ambulance straight away if:

- Chest pain that is severe, crushing, or spreads to your arm, jaw, or back
- Chest pain with sweating, shortness of breath, or nausea
- Fainting or feeling that you may pass out
- Pain that does not ease with rest
- Sudden shortness of breath, or coughing up blood



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This leaflet is general information to support the advice your doctor or nurse gave you today. It does not replace their advice. If you are worried, seek medical help.

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