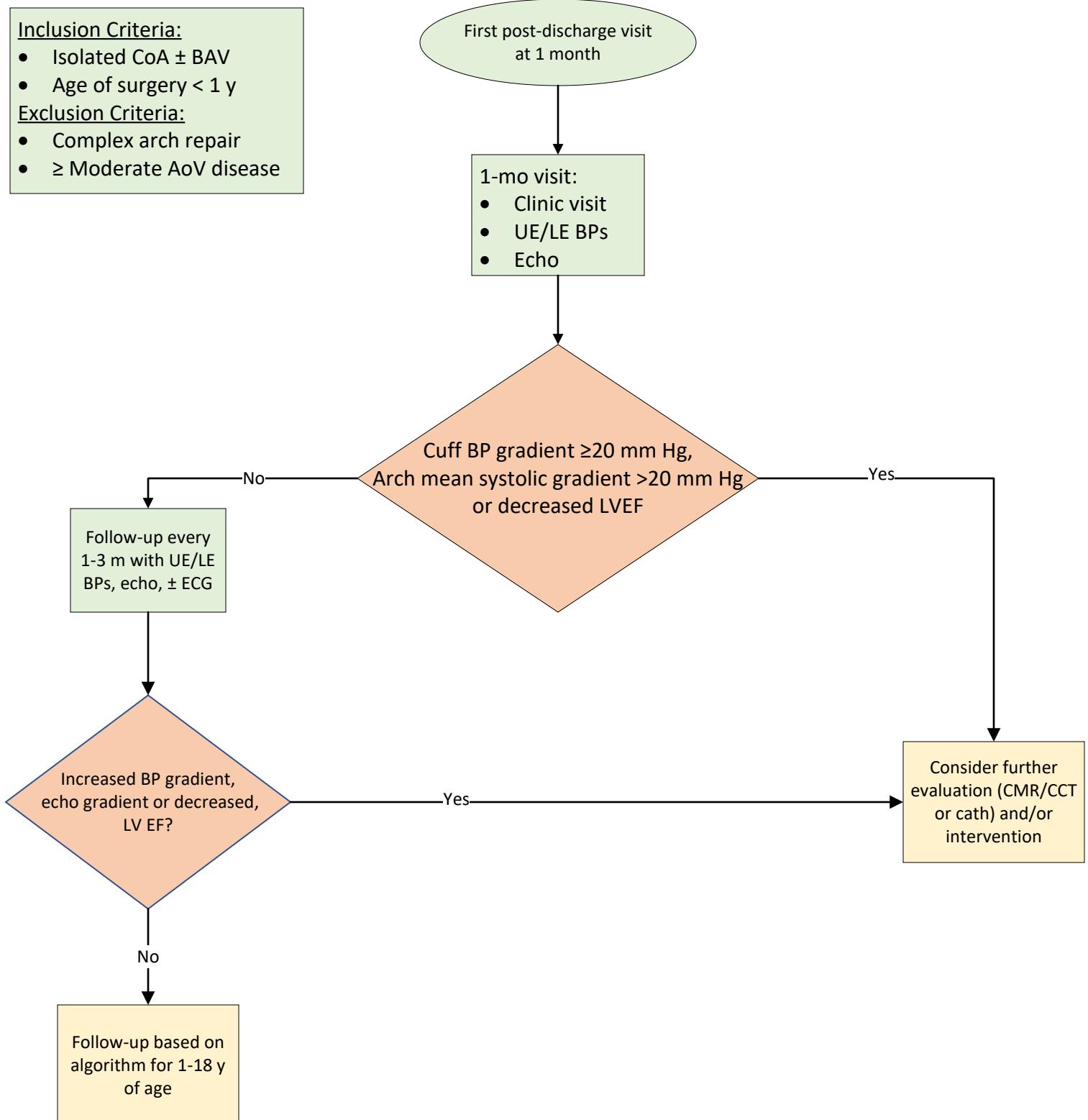
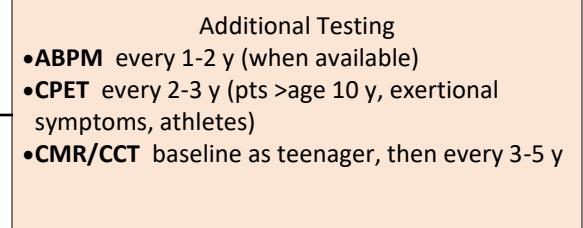
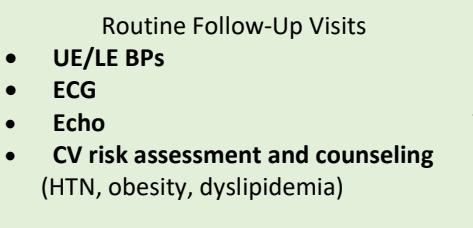
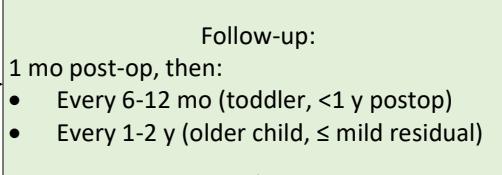
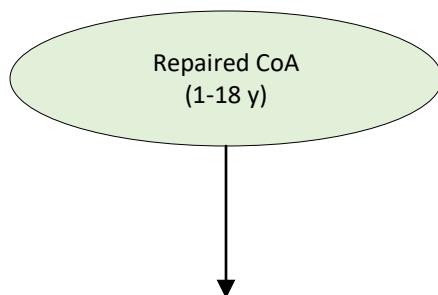
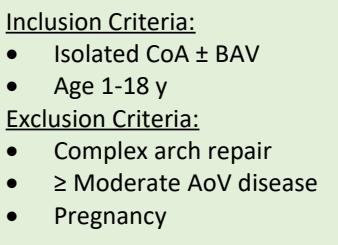


CHD Clinical Practice Algorithm: Repaired Coarctation Algorithm < 1 Year¹⁻³



CHD Clinical Practice Algorithm: Repaired Coarctation Algorithm 1-18 Years of Age³⁻⁹



Any of the following present?

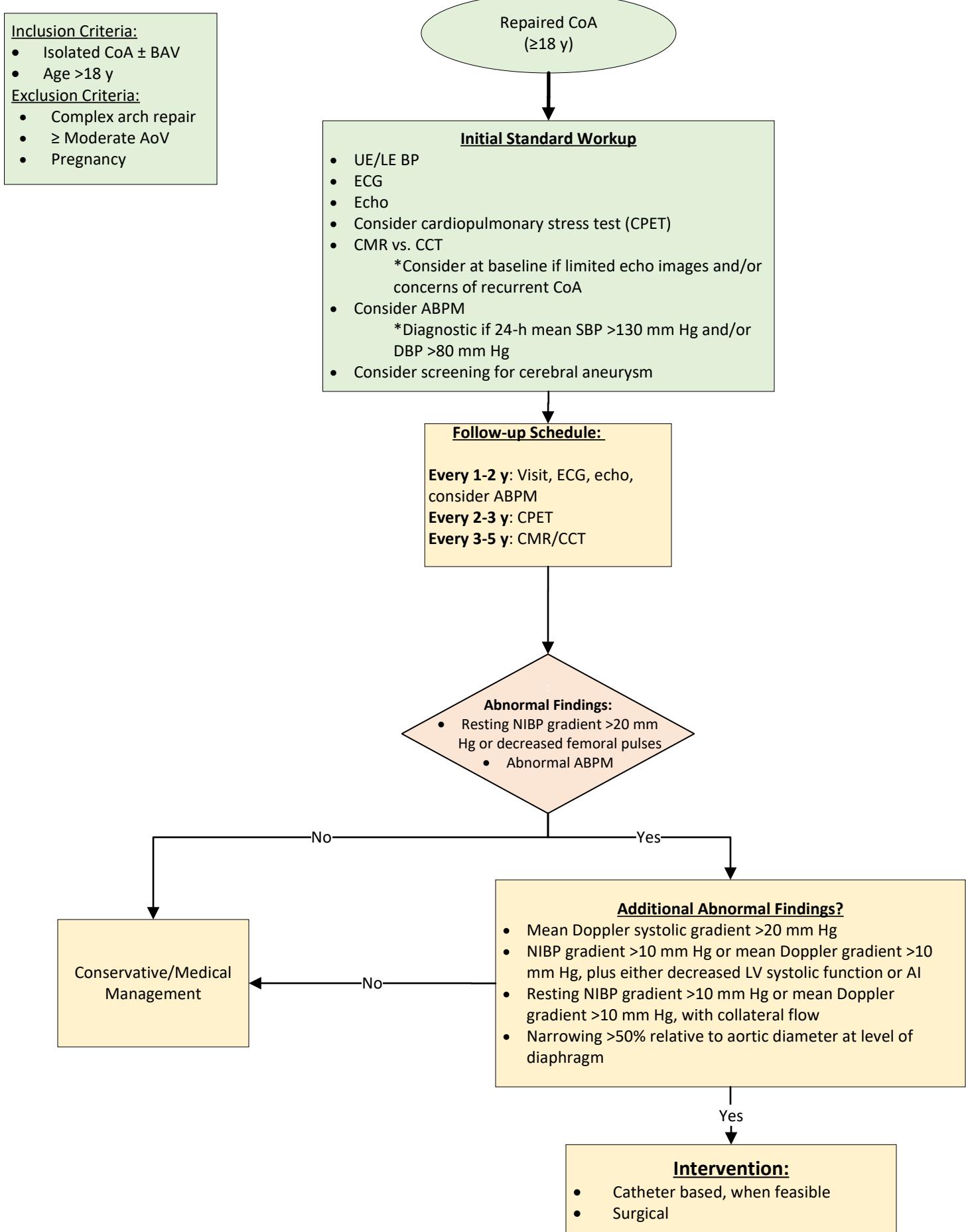
- Symptomatic
- Resting HTN
- UE vs. LE BP gradient >20 mm Hg
- Echo Doppler: mean systolic gradient >20 mm Hg or obstructive pattern
- LVH
- Decreased LV function
- Exaggerated BP response to exercise (>50-80 mm Hg change above resting)
- Anatomical evidence of significant recoarctation

No

Yes

Optimize medical management, obtain CMR/CCT, or consider intervention

CHD Clinical Practice Algorithm: Repaired Coarctation Algorithm ≥ 18 Years of Age ⁸⁻¹⁰



Abbreviation Key

ABPM = ambulatory blood pressure monitor; AI = aortic insufficiency; AoV = aortic valve; BAV = bicuspid aortic valve; BP = blood pressure; cath = catheterization; CCT = cardiac computed tomography; CHD = congenital heart disease; CMR = cardiac magnetic resonance; CoA = coarctation of the aorta; CPET = cardiopulmonary exercise testing; CV = cardiovascular; DBP = diastolic blood pressure; ECG = electrocardiography; echo = echocardiography; HTN = hypertension; LE = lower-extremity; LV = left ventricular; LVEF = left ventricular ejection fraction; LVH = left ventricular hypertrophy; NIBP = noninvasive blood pressure; postop = postoperative; pts = patients; SBP = systolic blood pressure; UE = upper-extremity.

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