ACC Latin America Conference 2017

MEXICO CITY
JUNE 22 – 24, 2017

GLOBAL EXPERTS, LOCAL LEARNING
Managing ACS in A Resource Challenged World

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Lynchburg, VA, USA
74 year old woman presents with ACS

- History of hypertension, CABG 1990, MI and stents to LAD in 2003, TIA, and asthma
- Increased CP episodes for one week, and continued chest pain in ED. Treated with nitrates, morphine; beta blocker; wheezing.
- BP 126/68, pulse 101, 80 kg, mild CHF
- Creatinine 1.7 mg/dL; TnT 0.27 ng/ml
- ECG showed 1mm anterolateral ST depression; echo EF 45%
- GRACE risk score
  - death in-hospital 16%
  - death/MI 6 mo 50%
74YO Male-Outpatient Visit

- Permanent Afib/Rate Control and OAC
- Recent NQWMI, DES to Cfx (2.5x32mm)
  - moderate, diffuse D2 to RCA, LAD  May 2017
- Meds- ASA 81mg, Warfarin, Clopidigrel 75
  BB, ACE, STATIN
- Echo- EF 45%, moderate MR
- Labs- Crt 2.0, K 5.4
## DAPT Calculator

1. **Age**
   - <65
   - 65-74
   - ≥ 75

2. **Diabetes**
   - Y
   - N

3. **Prior MI or PCI**
   - Y
   - N

4. **MI at pres**
   - Y
   - N

5. **Stent <3mm**
   - Y
   - N

6. **Vein graft**
   - Y
   - N

7. **EF <30, CHF**
   - Y
   - N

8. **Smoker? (2yrs)**
   - Y
   - N

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