

- 1. 52yo woman presents with atypical CP and a normal ECG.
- a) What are your initial management priorities (3 marks)
- b) List diagnostic tools you would use to risk stratify this patient for ACS. (2 marks)
- c) List the features your patient may have to be Stratified as a High Risk (3 marks)
- d) What is TIMI score? How would you calculate it? (2 marks)
- e) What are Differential diagnoses for this patient (list at least 10) See Dunn "Chest pain" (5 marks)

There is a good link on <a href="http://lifeinthefastlane.com/2010/11/ebm-chest-pain/">http://lifeinthefastlane.com/2010/11/ebm-chest-pain/</a>

- 2. Anticoagulation and antiplatelet treatment for ACS: discussion, **focus** on new antiplatelet agents.
  - a. Anticoagulation
    - i. Indication (3 marks)
    - ii. Heparin/LMWH (2 marks)
  - b. Antiplatelet agents
    - i. Indication (2marks)
    - ii. Aspirin
    - iii. Clopidogrel
    - iv. Prasugrel/Ticagrelor
    - v. Glycoprotein iib/iiia inhibitors

European Heart Journal 2011: Guidelines for ACS

http://www.escardio.org/guidelines-surveys/esc-guidelines/GuidelinesDocuments/Guidelines-NSTE-ACS-FT.pdf

3. A 62yo man presents to your outer suburban ED with an Anterior STEMI. Your hospital does not have a Cath Lab.



- a. Discuss angioplasty vs. thrombolysis for this patient (5 marks)
- b. What are the issues regarding transport of this patient to a Cathlab 20minutes away by road. (3marks)
- c. List the complications of AMI (3marks)
- d. List the conditions with ST elevation other than STEMI (at least 8) (4marks)
- e. List the conditions with cardiac troponin elevation unrelated to ACS (3marks)