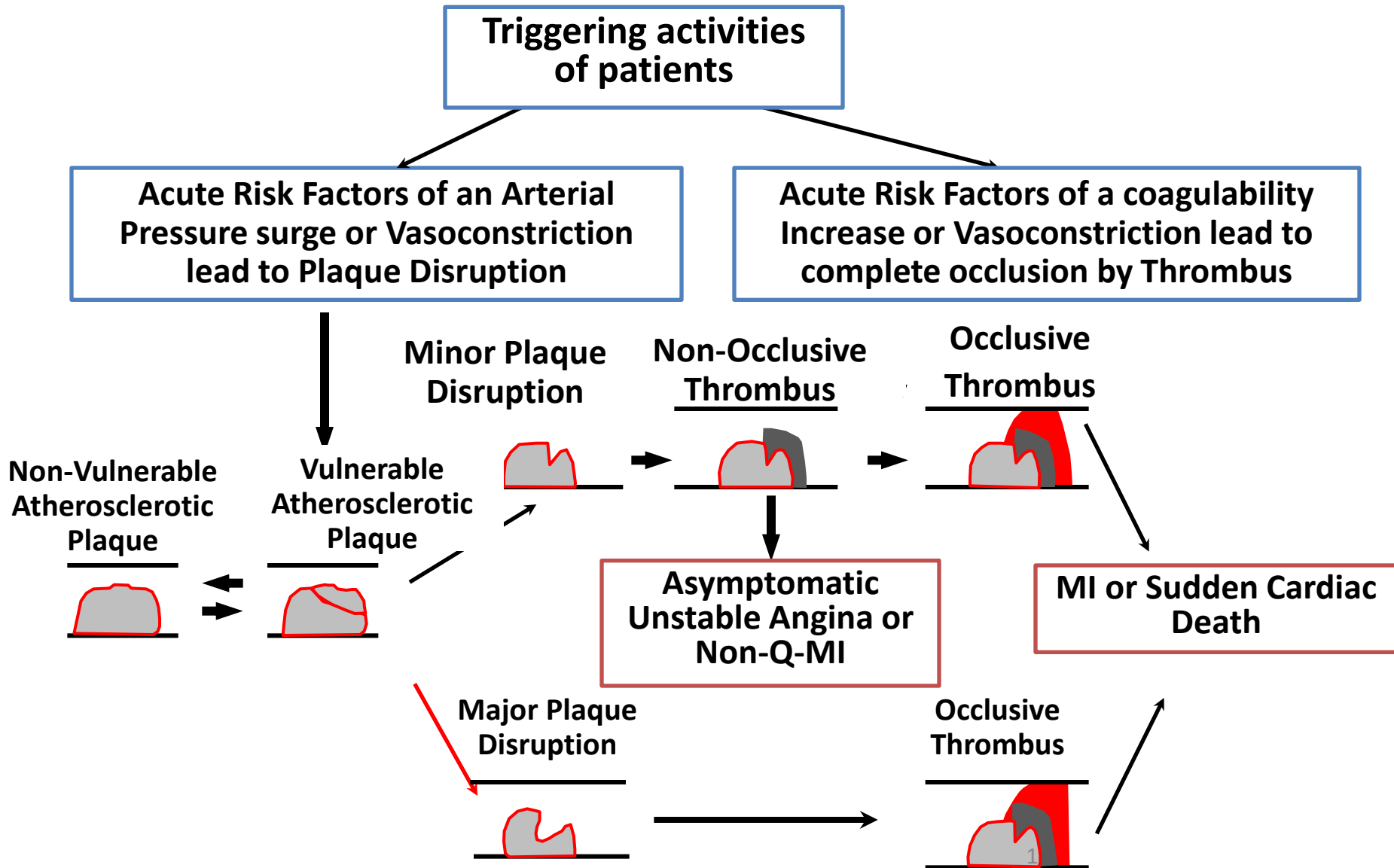


Acute Coronary Syndromes



Chest Pain

Admission

Working diagnosis

ECG

Bio-chemistry

Risk stratification

Diagnosis

Treatment

Suspicion of **Acute Coronary Syndrome**

Persistent ST – elevation

ST/T – Abnormalities

Normal or Undetermined ECG

Troponin positive

Troponin 2 x negative

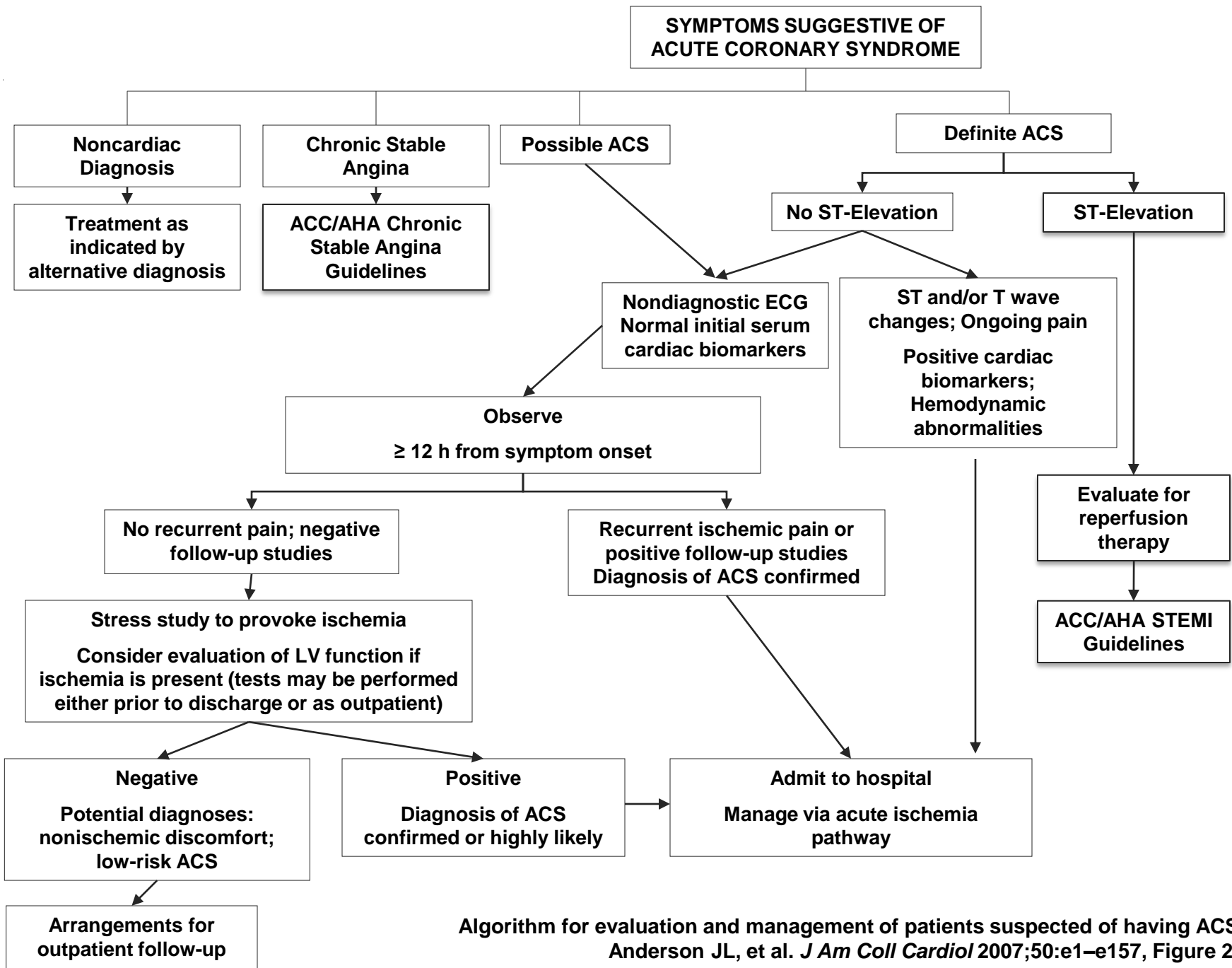
High Risk *Low Risk*

STEMI

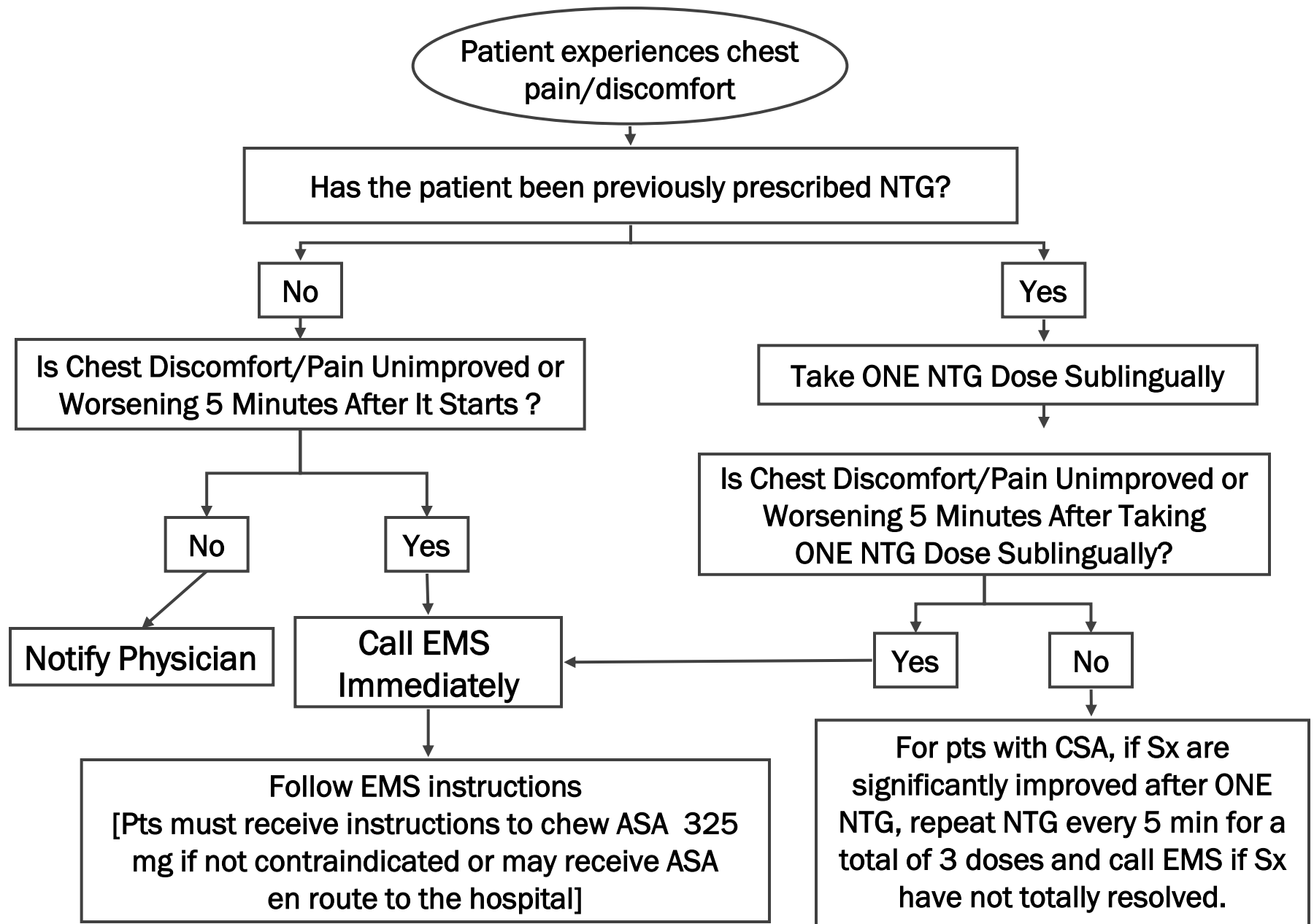
NSTEMI **Unstable Angina**

Reperfusion

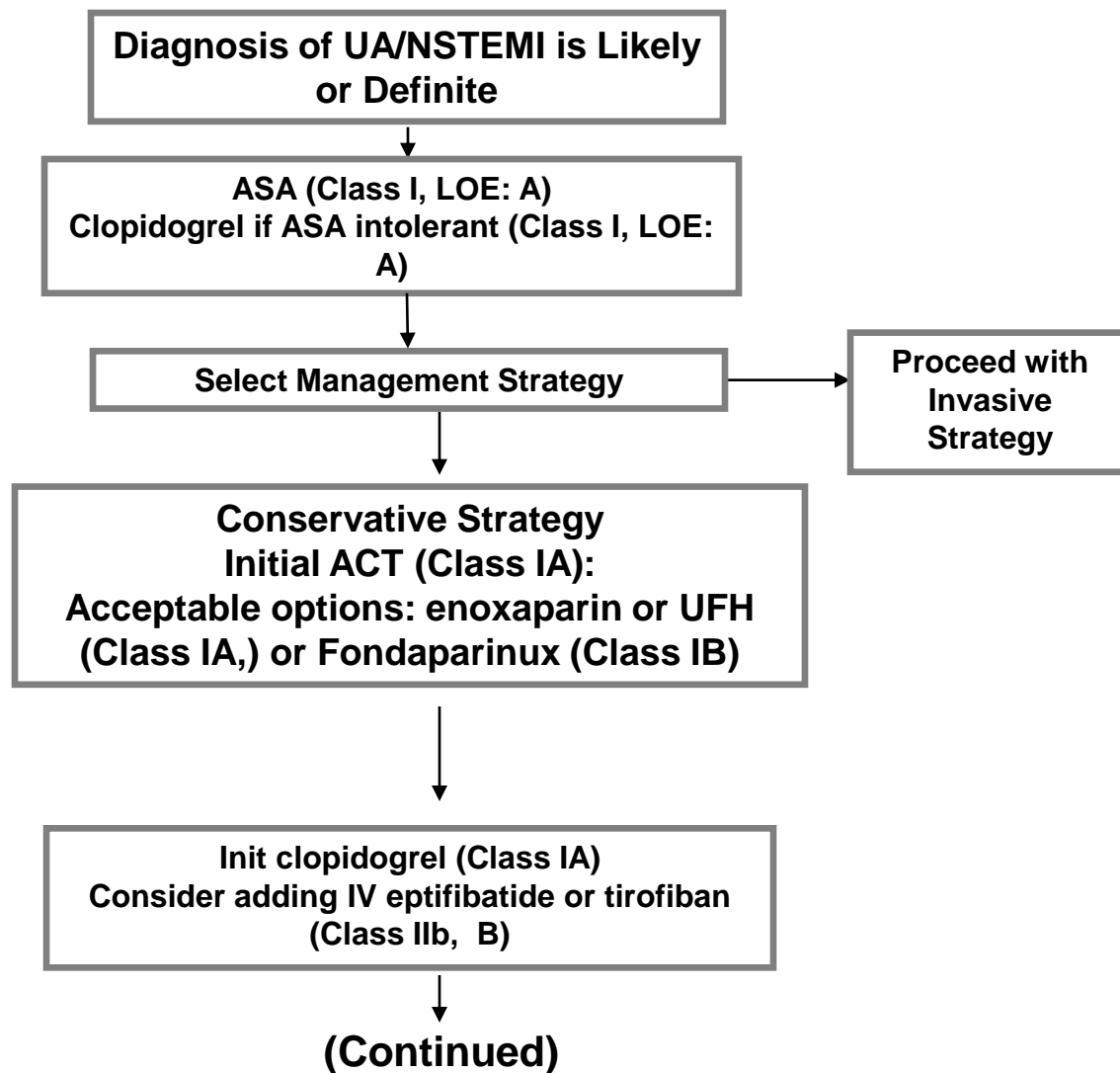
Early Invasive **Conservative**



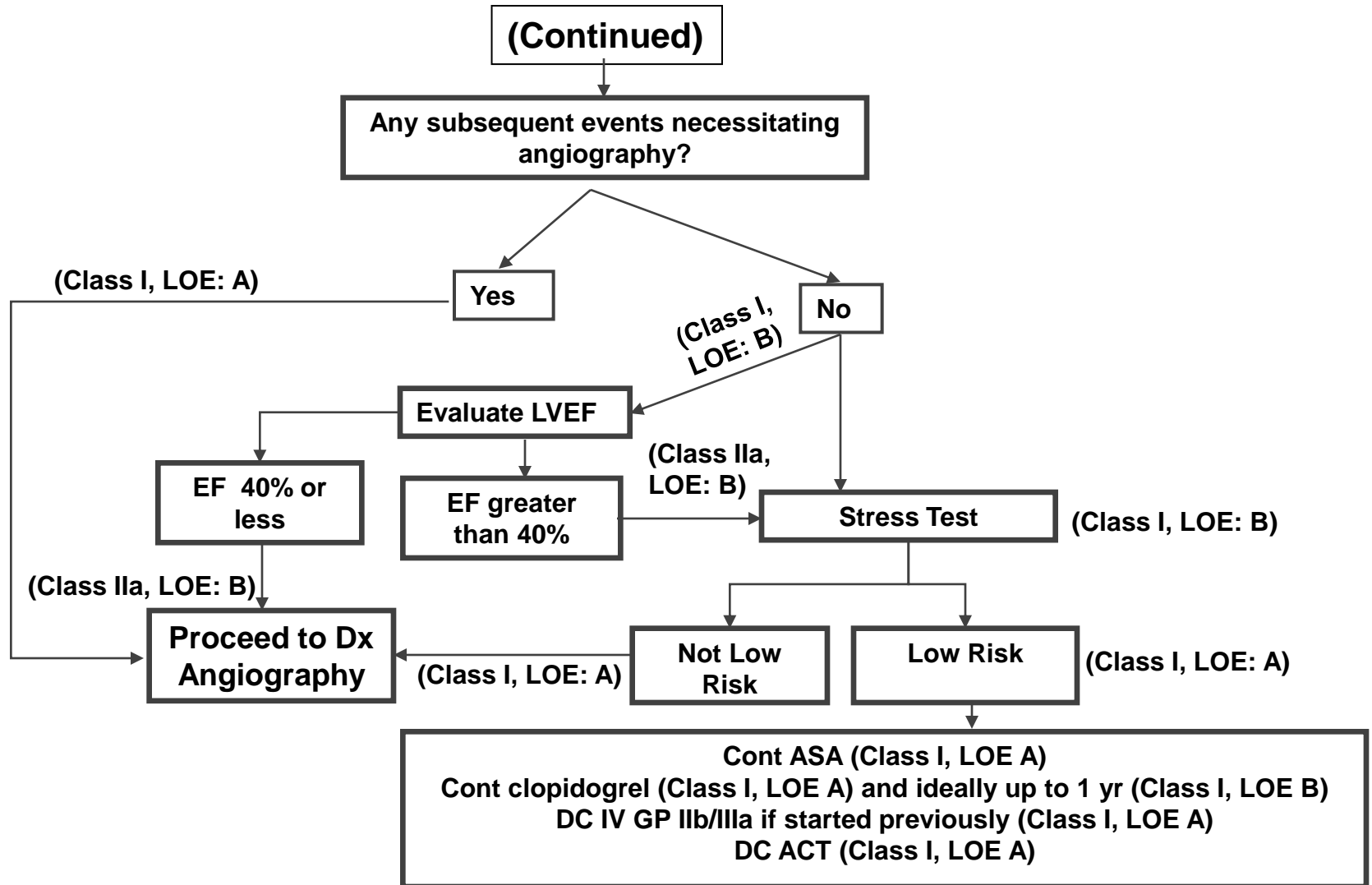
Algorithm for evaluation and management of patients suspected of having ACS
Anderson JL, et al. *J Am Coll Cardiol* 2007;50:e1–e157, Figure 2.



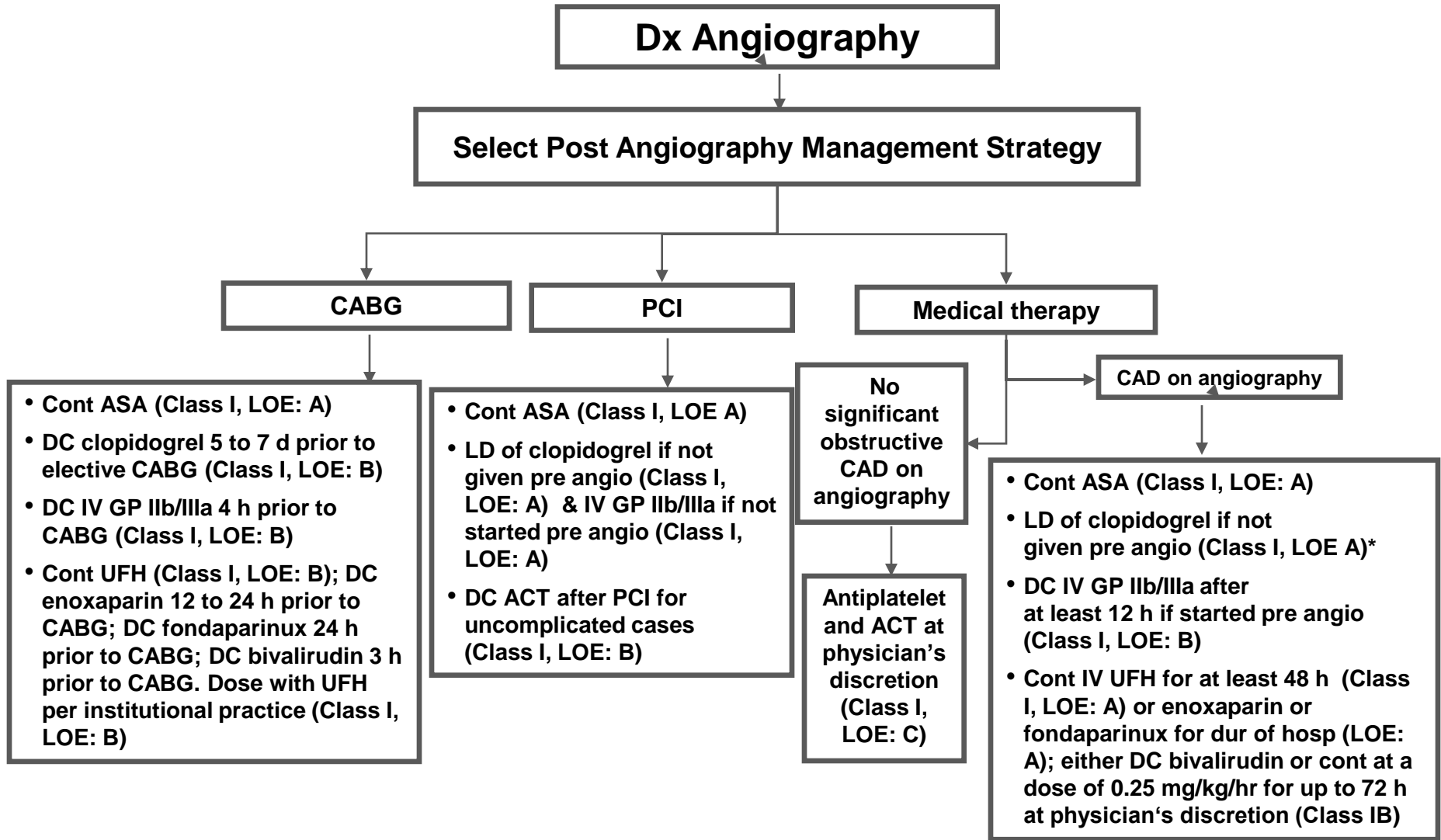
Algorithm for UA/NSTEMI Managed by an Initial Conservative Strategy



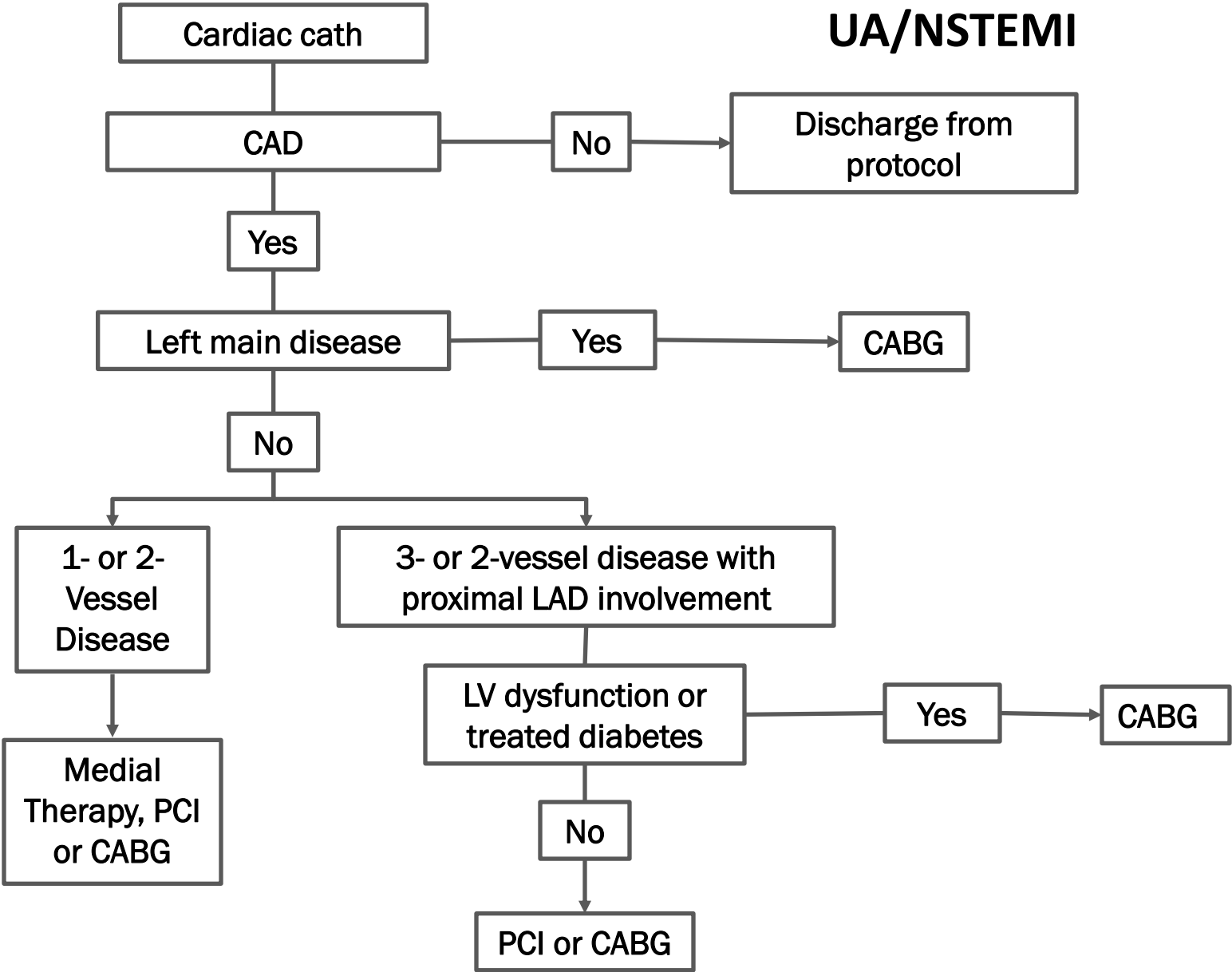
Algorithm for UA/NSTEMI Managed by an Initial Conservative Strategy



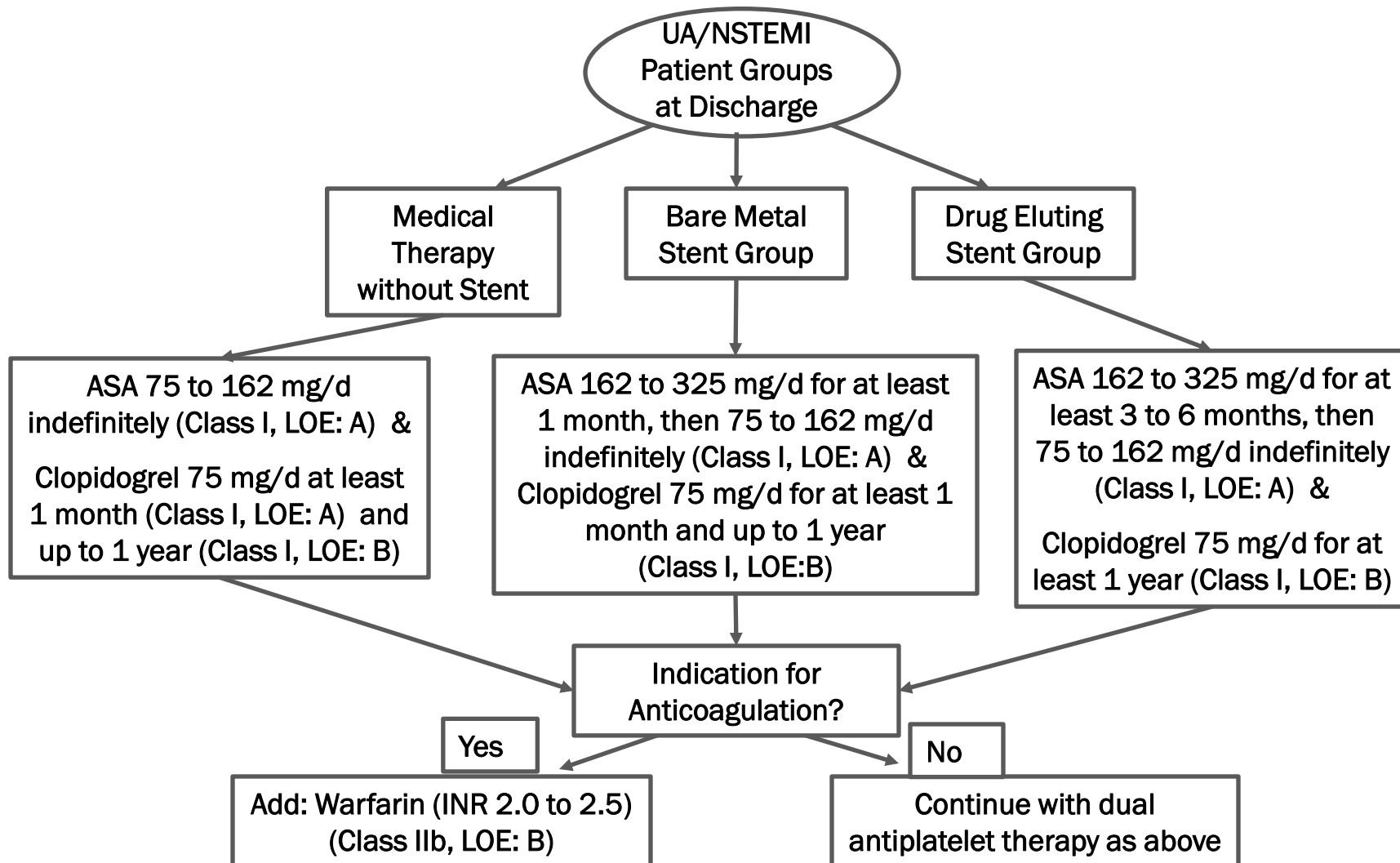
Management after Diagnostic Angiography in Patients with UA/NSTEMI



Revascularization Strategy in UA/NSTEMI



Long-Term Antithrombotic Therapy at Hospital Discharge after UA/NSTEMI



Pathway: Triage and Transfer for PCI (in STEMI)

