

## Case 2

- Acknowledgement: This case is for Dr. Abdel Haleem Shawky

## Case 2

- 75 years old gentleman
- HTN,DM2 and dyslipidemia
- H/O urinary bladder carcinoma.
- Presented as NSTEMI , with HF.

03-JUL-1943 (74 yr)  
Male Caucasian  
66in 198lb  
Room:111  
Loc:27

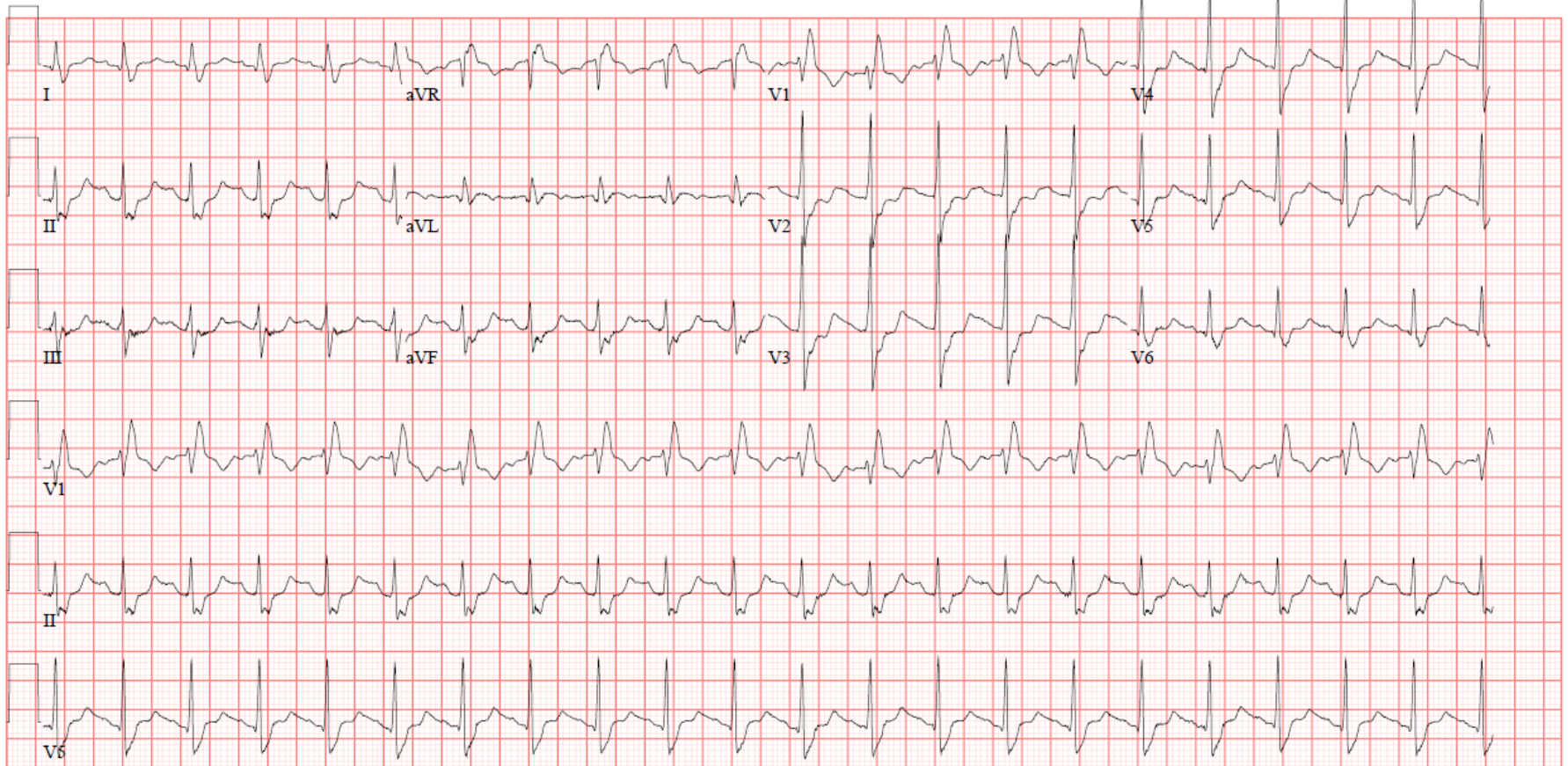
Vent. rate 128 BPM  
PR interval 120 ms  
QRS duration 148 ms  
QT/QTc 348/508 ms  
P-R-T axes 46 28 66

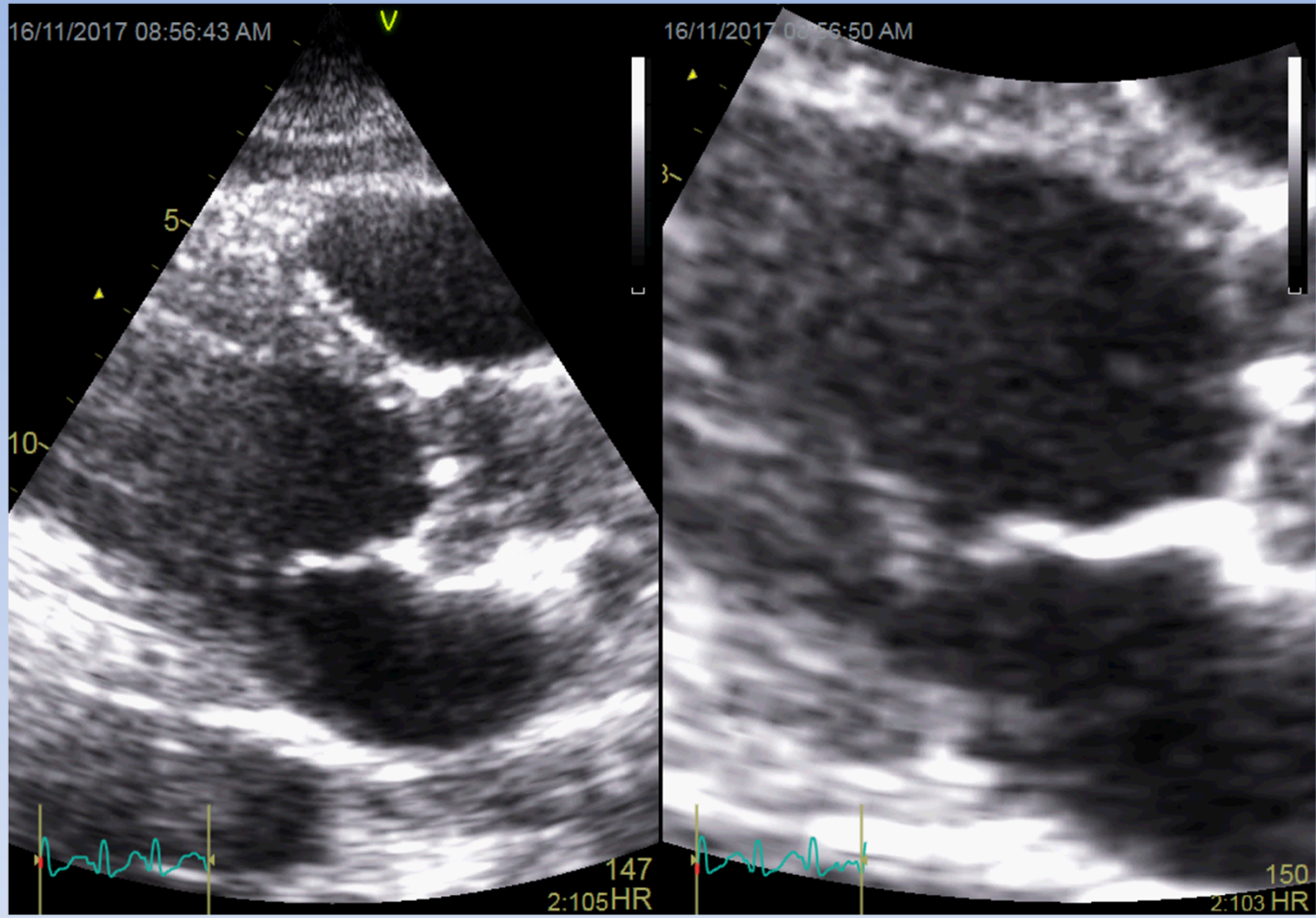
Sinus tachycardia  
Right bundle branch block  
Abnormal ECG

Technician: 024685  
Test ind:

Referred by:

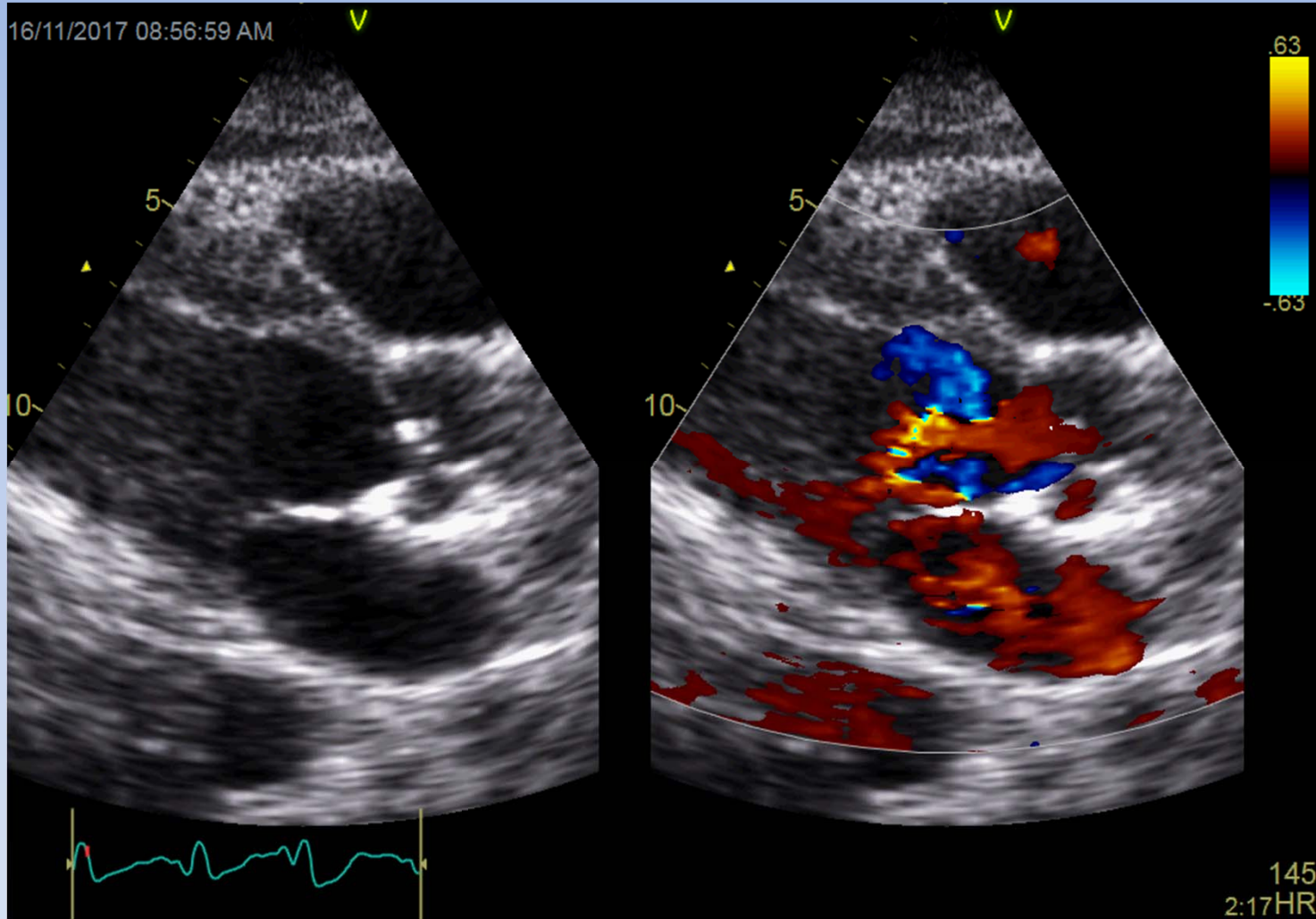
Unconfirmed



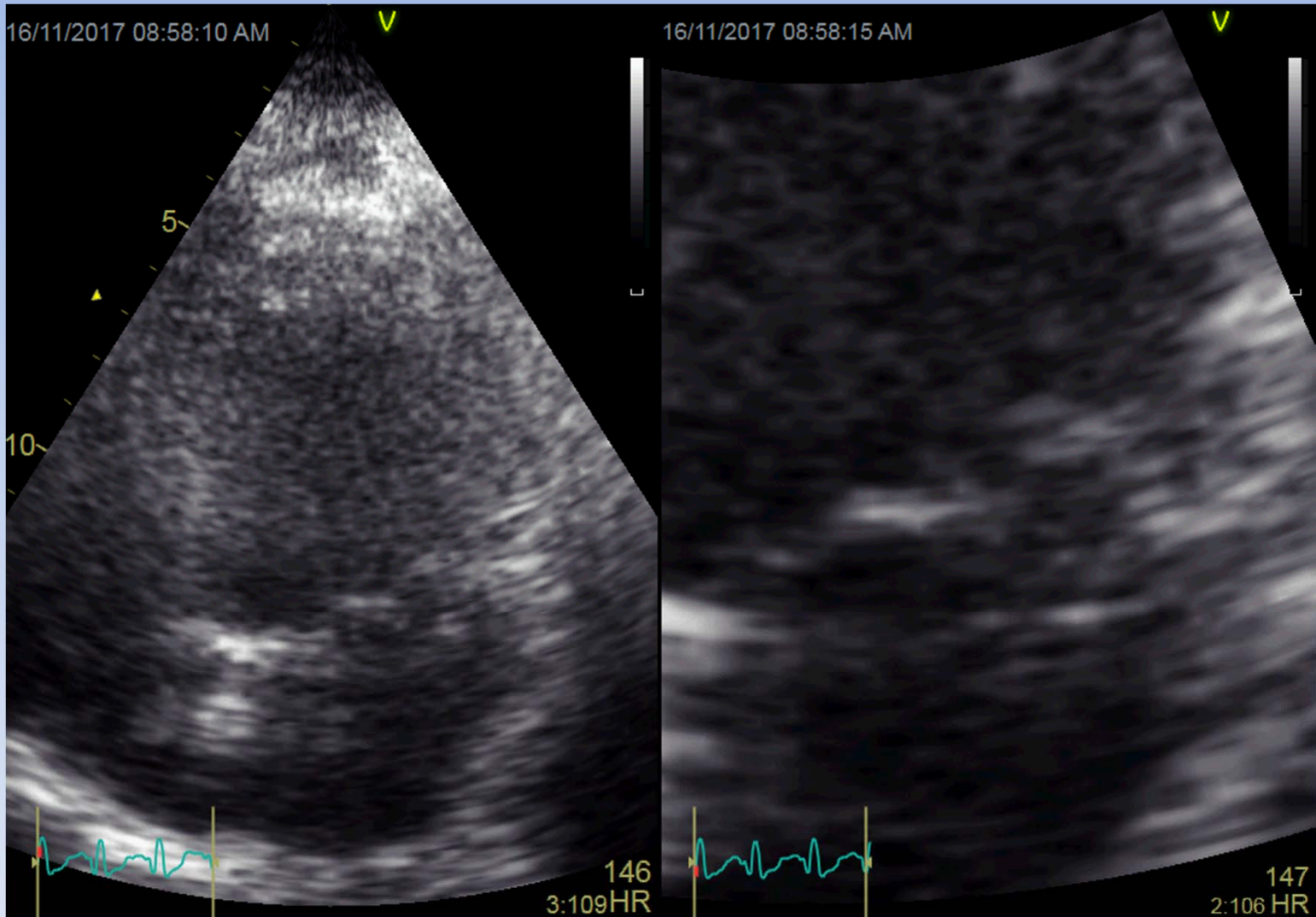


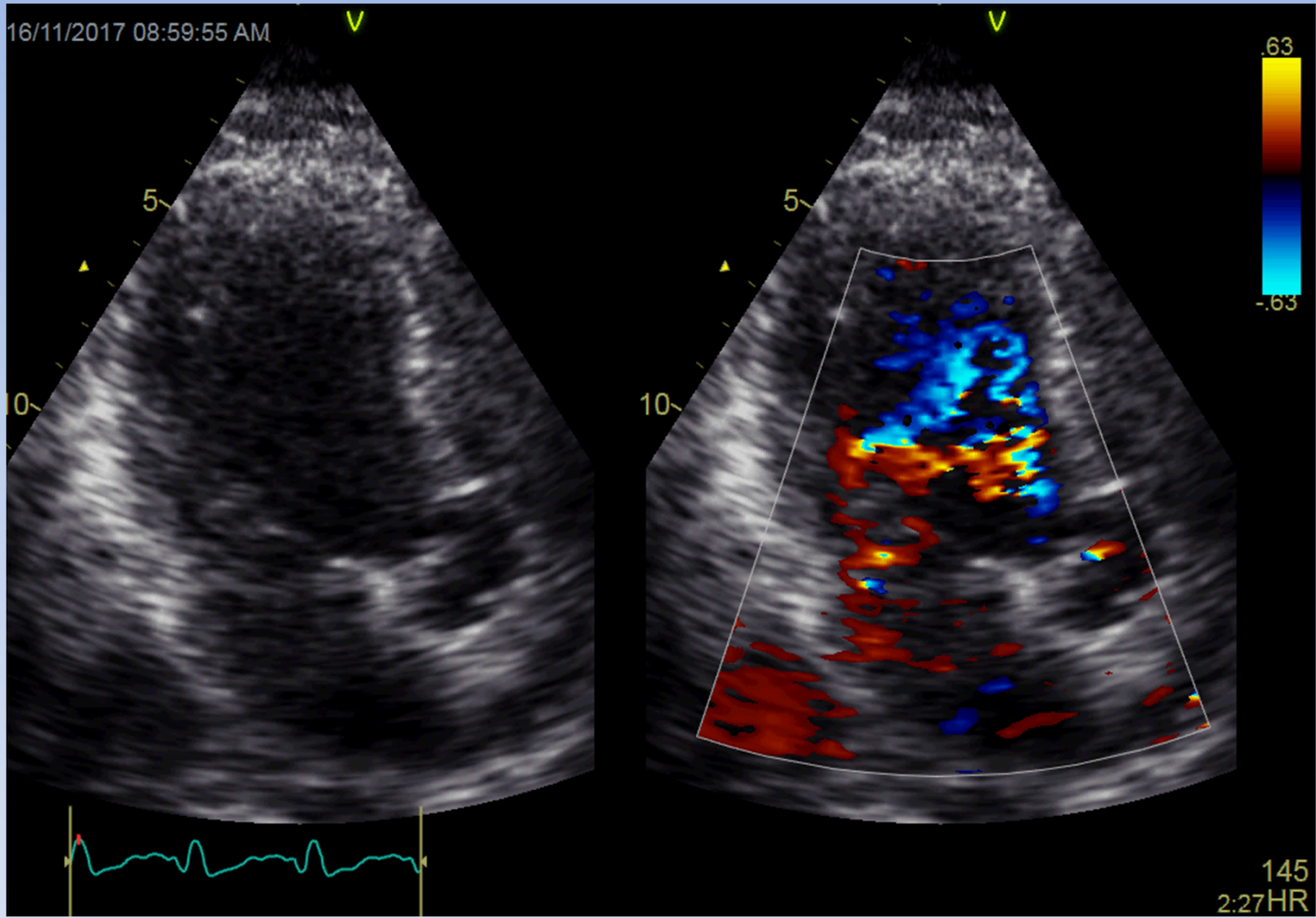


16/11/2017 08:56:59 AM

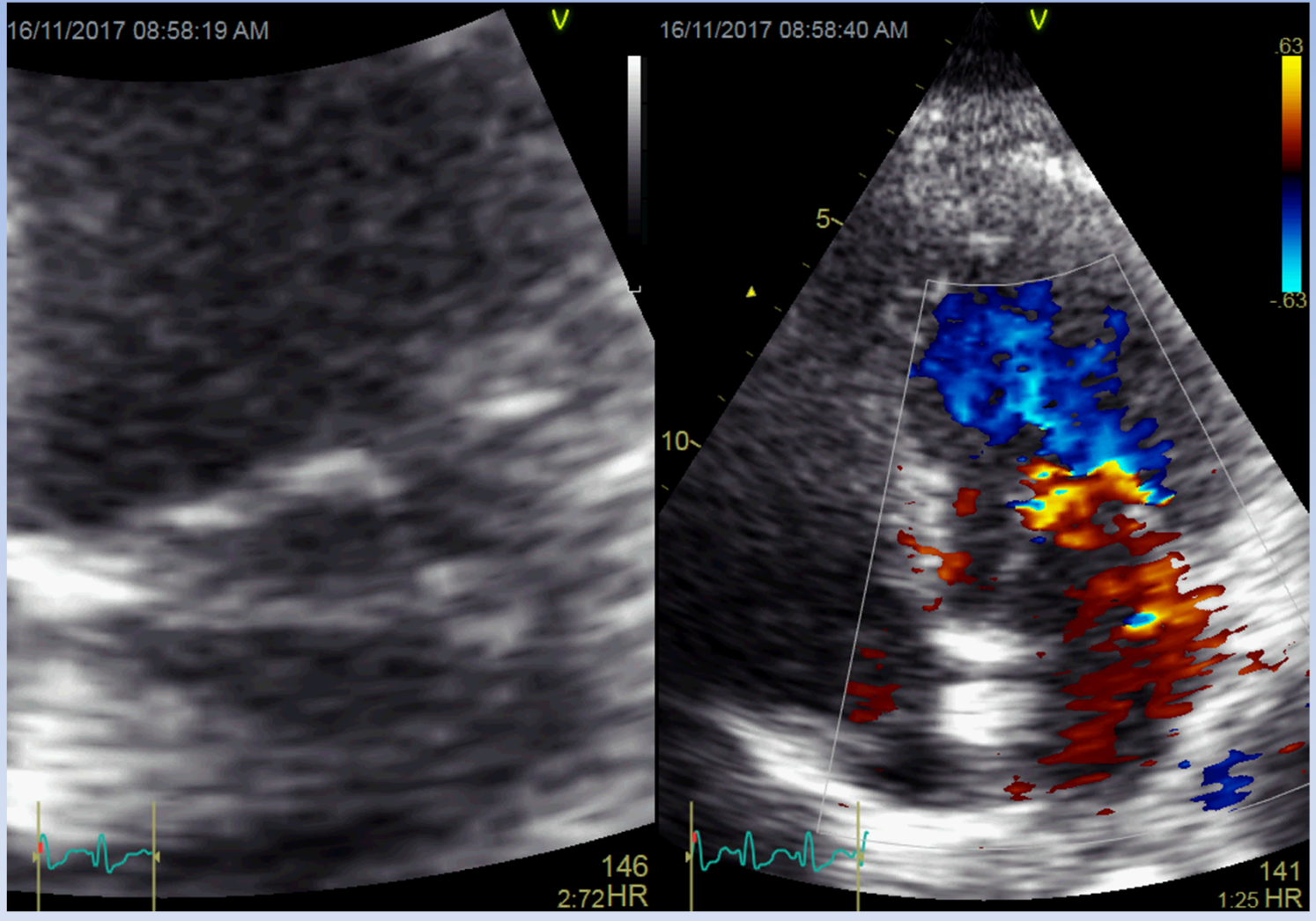


145  
2:17HR







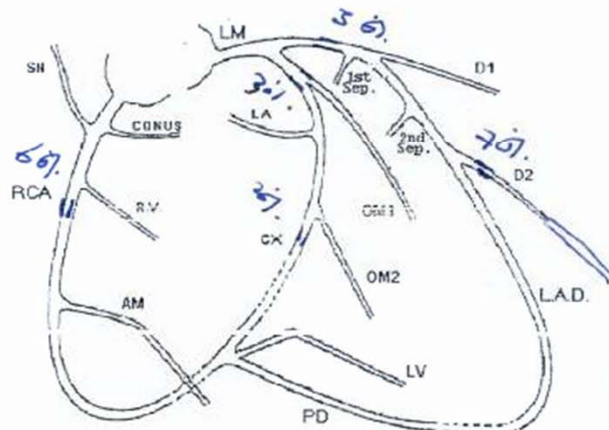


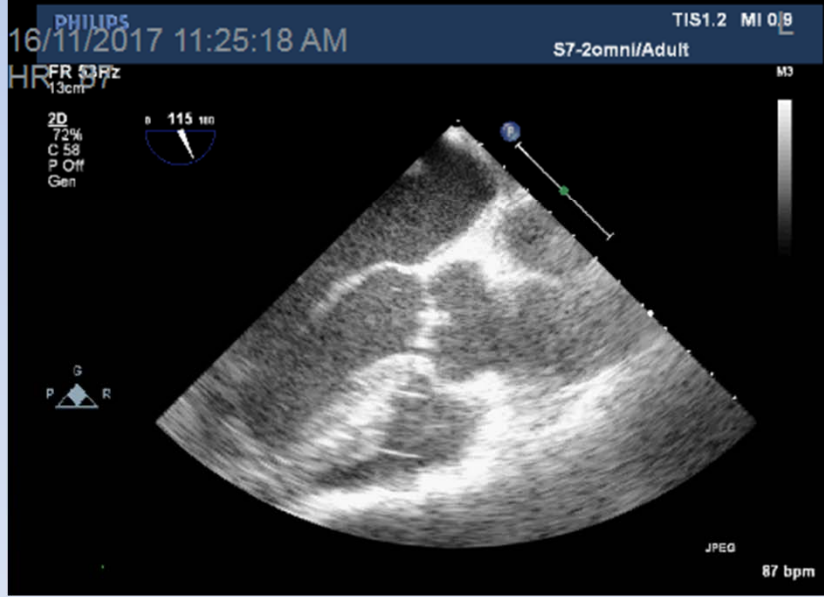
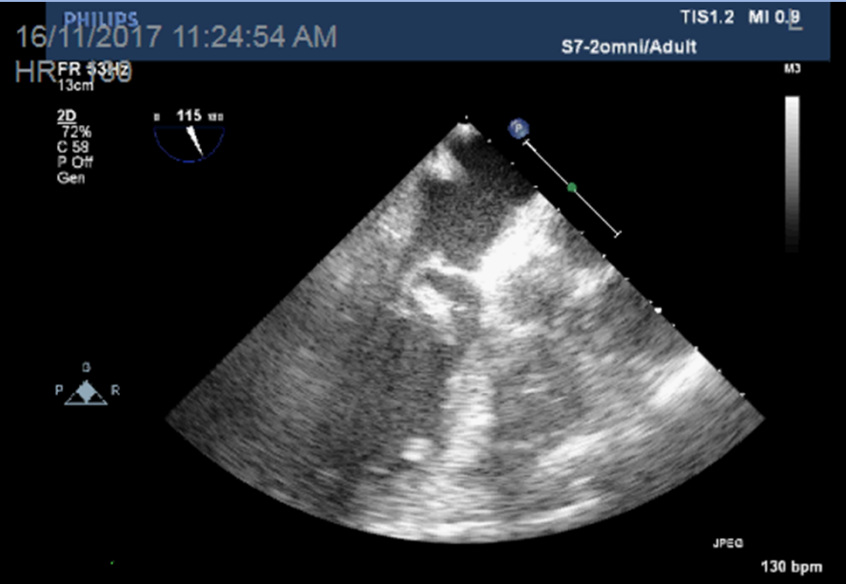
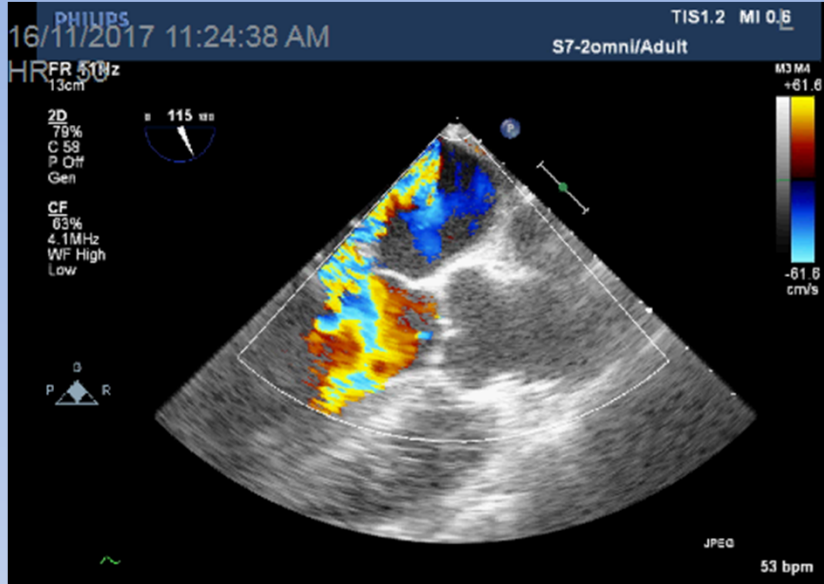
Risk Factor  HTN  DM  Dyslipidemia  Smoker  Exsmoker  Obesity  IDDM  CKD on Hemodialysis  ESRD  CVD  PVD

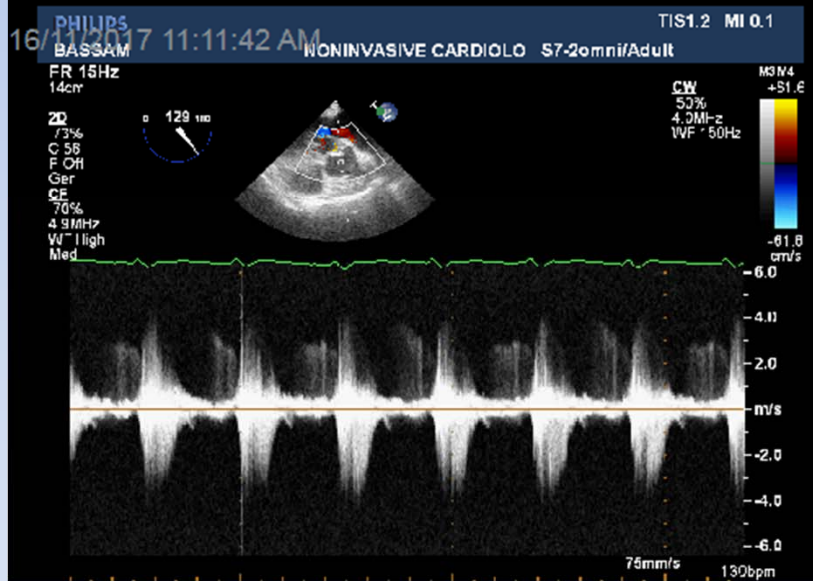
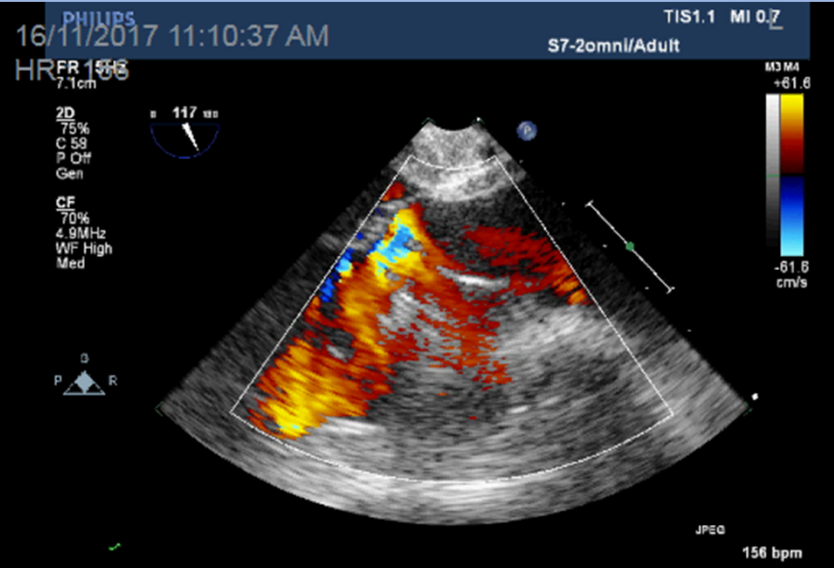
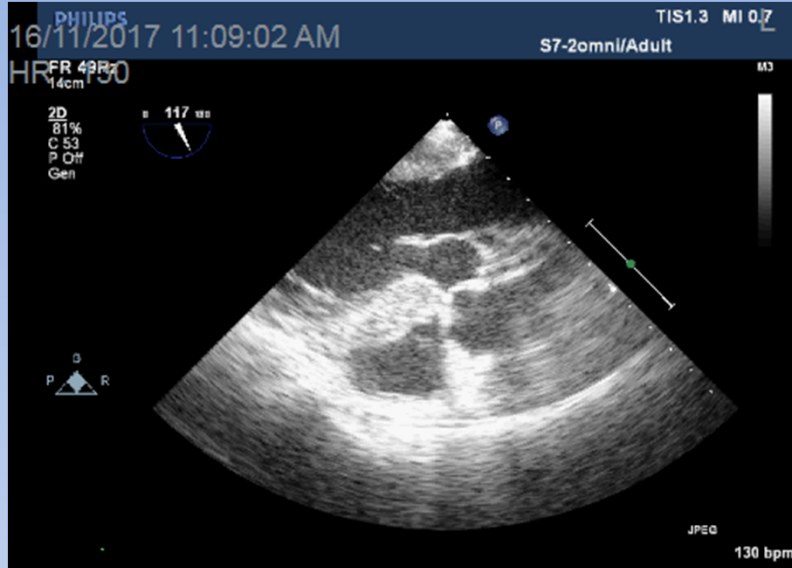
Indication NSTEMI, Intubated, Pulmonary Edema

|                   |   |  |
|-------------------|---|--|
| Procedure         | <input checked="" type="checkbox"/> COR Angio. <input type="checkbox"/> LV gram <input type="checkbox"/> Aortogram <input type="checkbox"/> Graft Study Other Proc. <u>JABP-40cc.</u>   |  |
|                   | <input type="checkbox"/> IVUS to Value  | <input type="checkbox"/> IFR/FFR to Value                        |
| XRay Fluoro Time  | <u>4.4</u> Minutes  | XRay Fluoro dose <u>6971.07</u> $\mu\text{Gy m}^2$               |
| Dye used          | <input checked="" type="checkbox"/> Omnipaque <input type="checkbox"/> Visupaque. Total amount used <u>60</u> ml  | Ht <u>170</u> cm HB <u>15</u><br>Wt <u>82</u> Kg Hct <u>46.1</u> |
| Catheter Route    | <input checked="" type="checkbox"/> Right <input checked="" type="checkbox"/> Left <input checked="" type="checkbox"/> Femoral <input type="checkbox"/> Radial (Artery/Vein) <input checked="" type="checkbox"/> Fluro Guided: <u>Y/N</u> <input type="checkbox"/> Other: |  |
| Diagnostic        | L. system <u>SF JL 4.0</u> <u>JABP INSERTION.</u>   |  |
| Catheter:         | R. system <u>SF JR 4.0.</u>   |  |
| Hemodynamic Study |   | Ventricular Volume Study   |
| Site              | Pres.I  | Pres.II  |
| AO                | Pre   | Post   |
|                   | <u>81/65 (71)</u>   |  |
|                   | Ejection Fraction   | %  |
|                   | EF (By ECHO)  | <u>50 % (APPROX)</u>   |
| Tech.:            |   | <u>ALTAF</u>   |
| Scrub:            |   | <u>MUZAFFAR / ABID.</u>  |

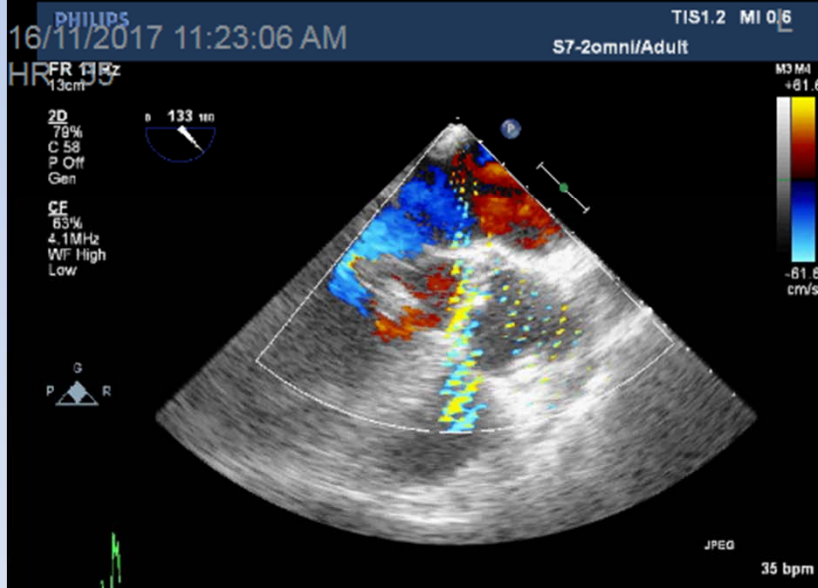
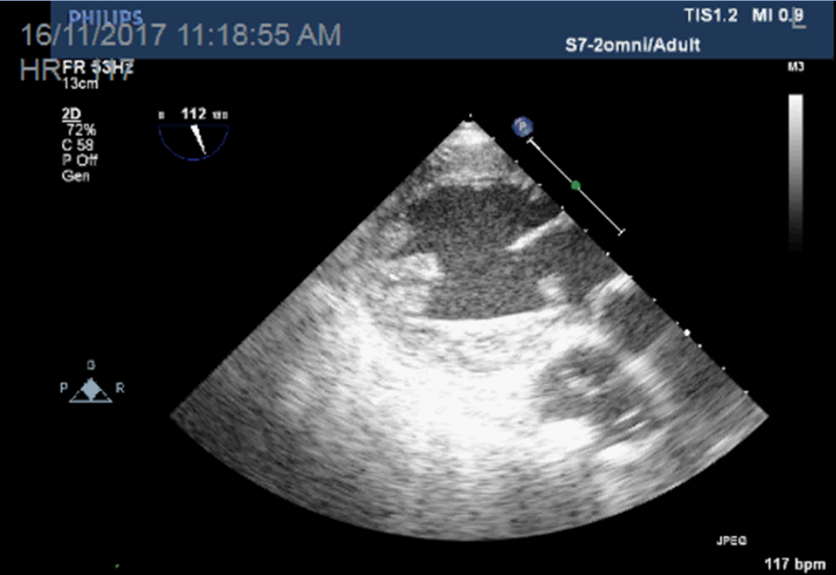
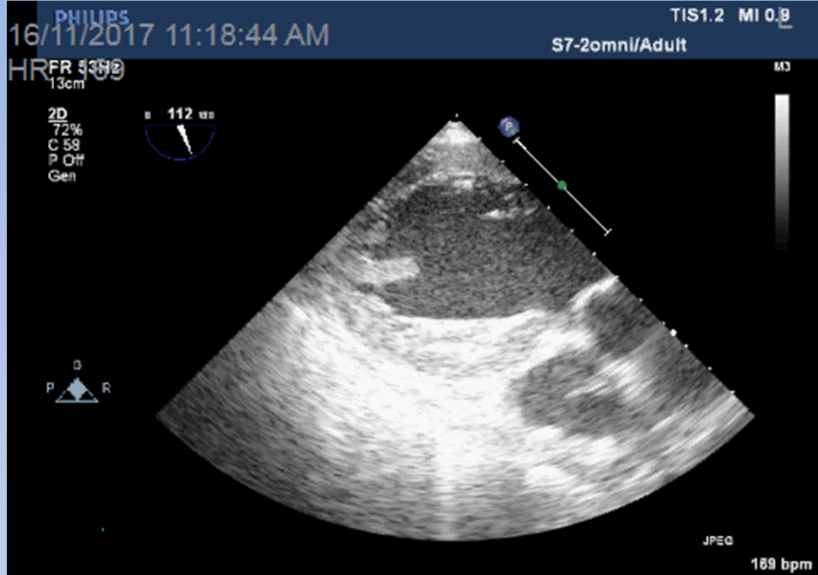
| Category                | Medication            | Dose         | Route | Category      | Medication | Dose       | Route |
|-------------------------|-----------------------|--------------|-------|---------------|------------|------------|-------|
|                         | Xylocaine             | <u>10</u> ml | SC    |               | Fentanyl   | mcg        |       |
| Anticoagulant           | LMWH                  | IU           |       | Sedation      | Midazolam  | mg         |       |
|                         | UFH                   |              |       |               | Morphine   | mg         |       |
| Aspirin                 | Aspirin               | mg           |       |               | Dopamine   | mcg/kg/min |       |
| Direct Inhibitors       | Bivalirudin           |              |       | Atropine      | mg         |            |       |
|                         | Integrilin (stat)     | mcg/kg       |       | Adenosine     | mcg        |            |       |
| Glycoprotein IIb / IIIa | Integrilin (infusion) | mcg/kg/min   |       | Adrenaline    | mcg/kg/min |            |       |
|                         | Other                 |              |       | Nitroglycerin | mcg        |            |       |
| Reclal Approach Med.    | Verapamil             | mg           |       | ISDN          | mcg/min    |            |       |
| Thienopyridines         | Clopidogrel (Plavix)  | mg           |       |               |            |            |       |
|                         | prasugrel             |              |       |               |            |            |       |











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HR : 179

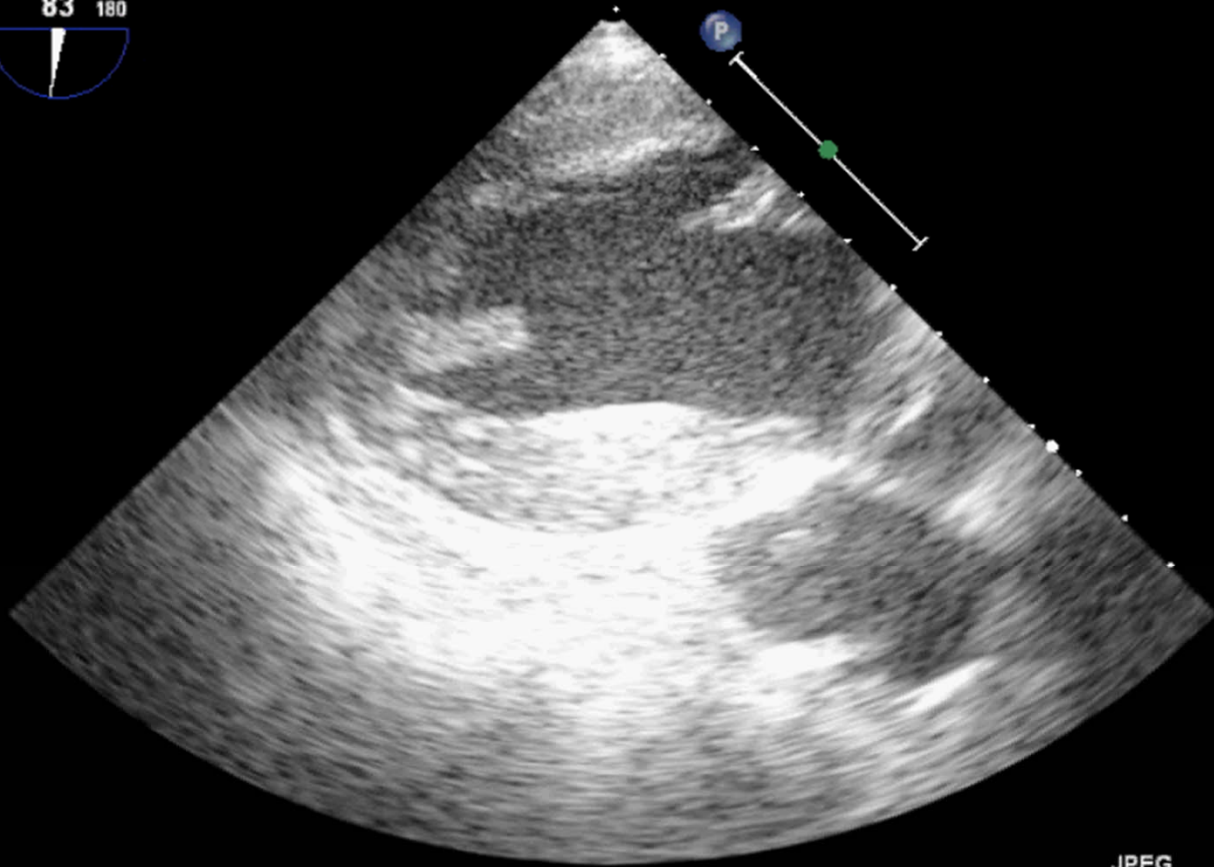
TIS1.2 MI 0.9<sup>L</sup>

S7-2omni/Adult

FR 53Hz  
13cm

M3

2D  
72%  
C 58  
P Off  
Gen



JPEG

179 bpm

16/11/2017 11:28 AM  
HR : 164

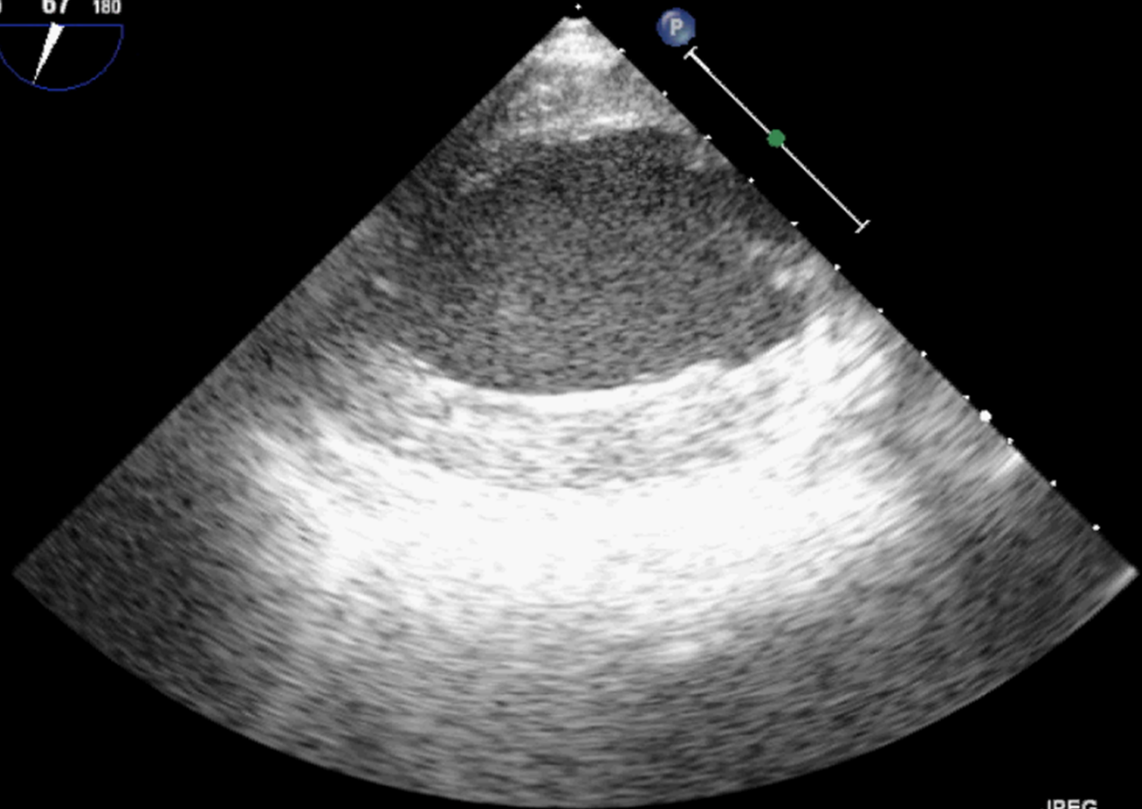
TIS1.2 MI 0.9<sup>L</sup>

S7-2omni/Adult

FR 53Hz  
13cm

M3

2D  
72%  
C 58  
P Off  
Gen



JPEG

164 bpm

16/11/2017 11:53 AM  
HR : 59

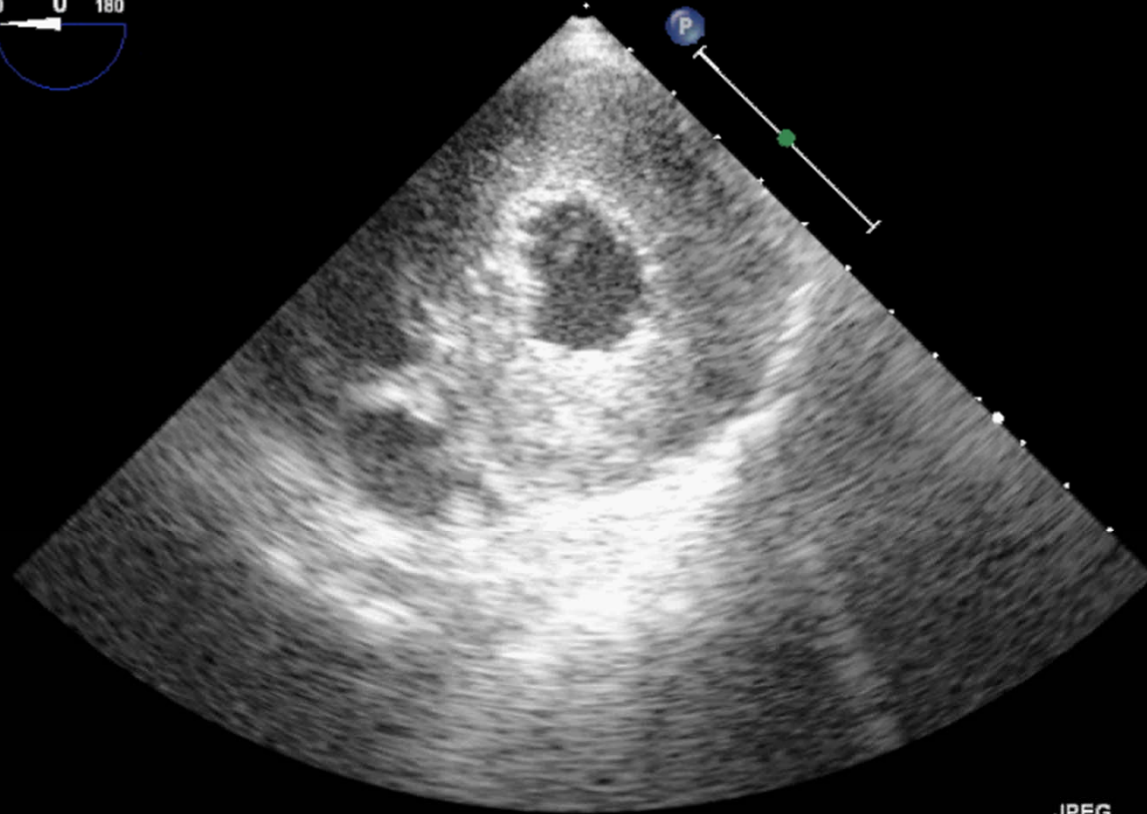
TIS1.2 MI 0.9<sup>L</sup>

S7-2omni/Adult

FR 53Hz  
13cm

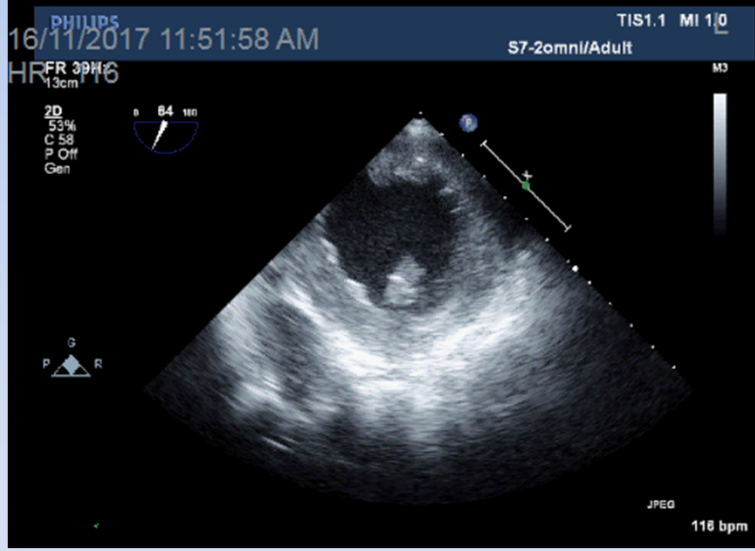
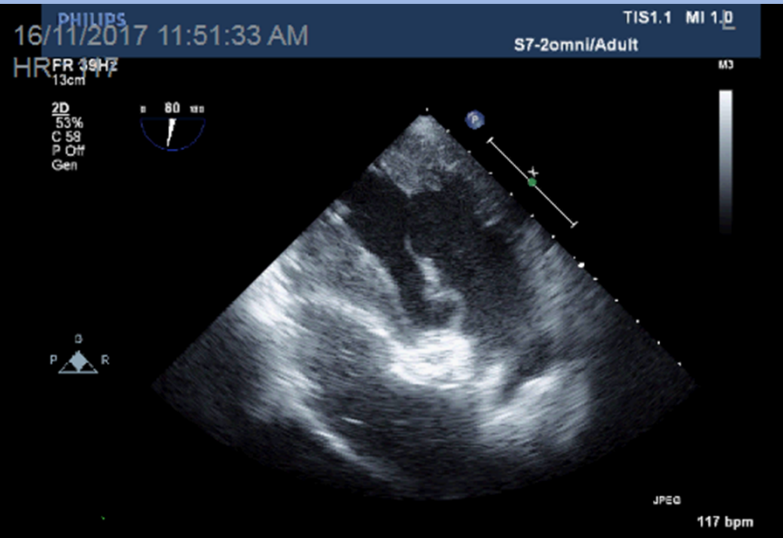
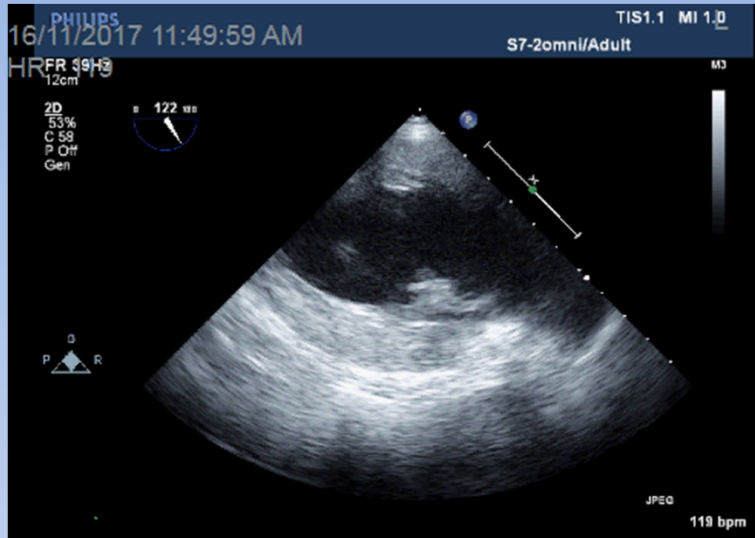
M3

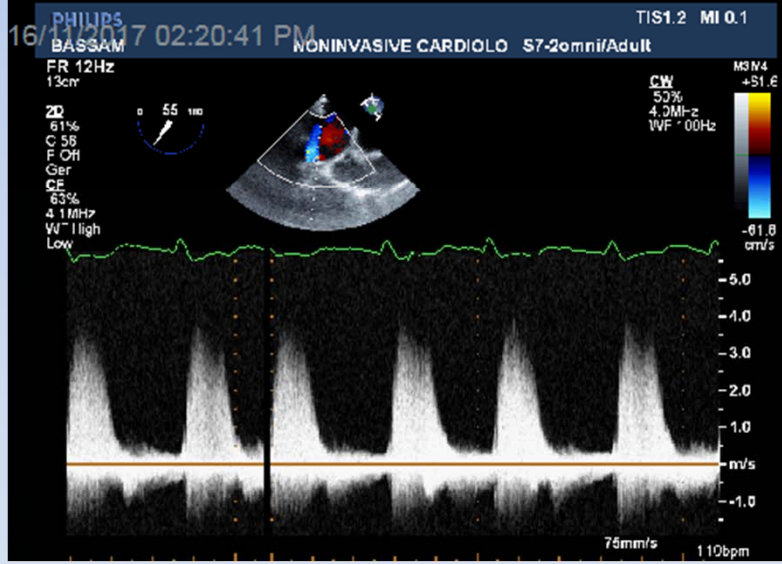
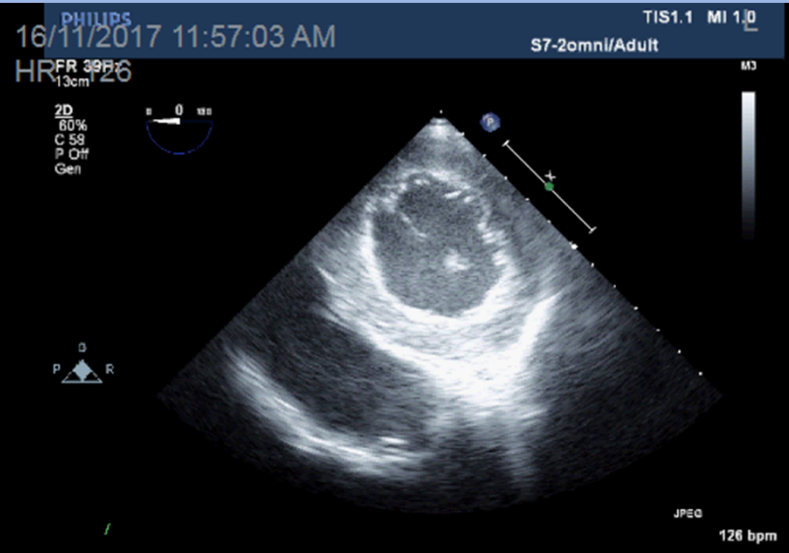
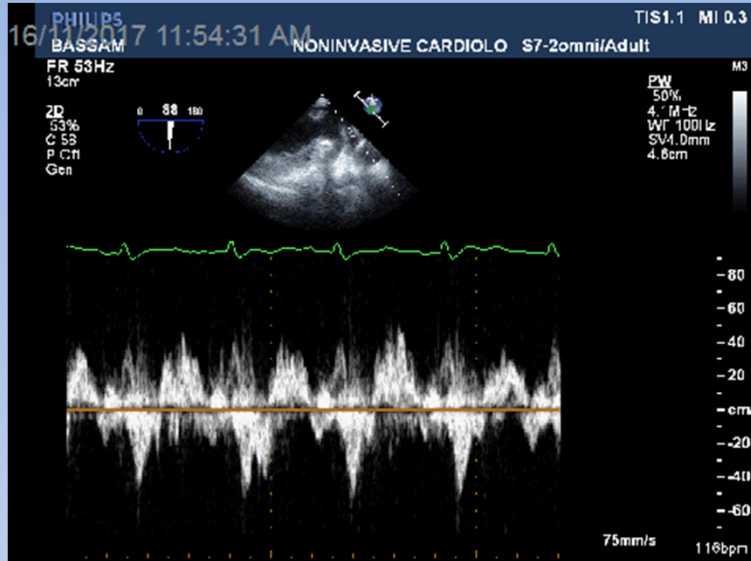
2D  
72%  
C 58  
P Off  
Gen



JPEG

59 bpm







***POSTOP. IN OR***

MV Bioprosthesis size 31



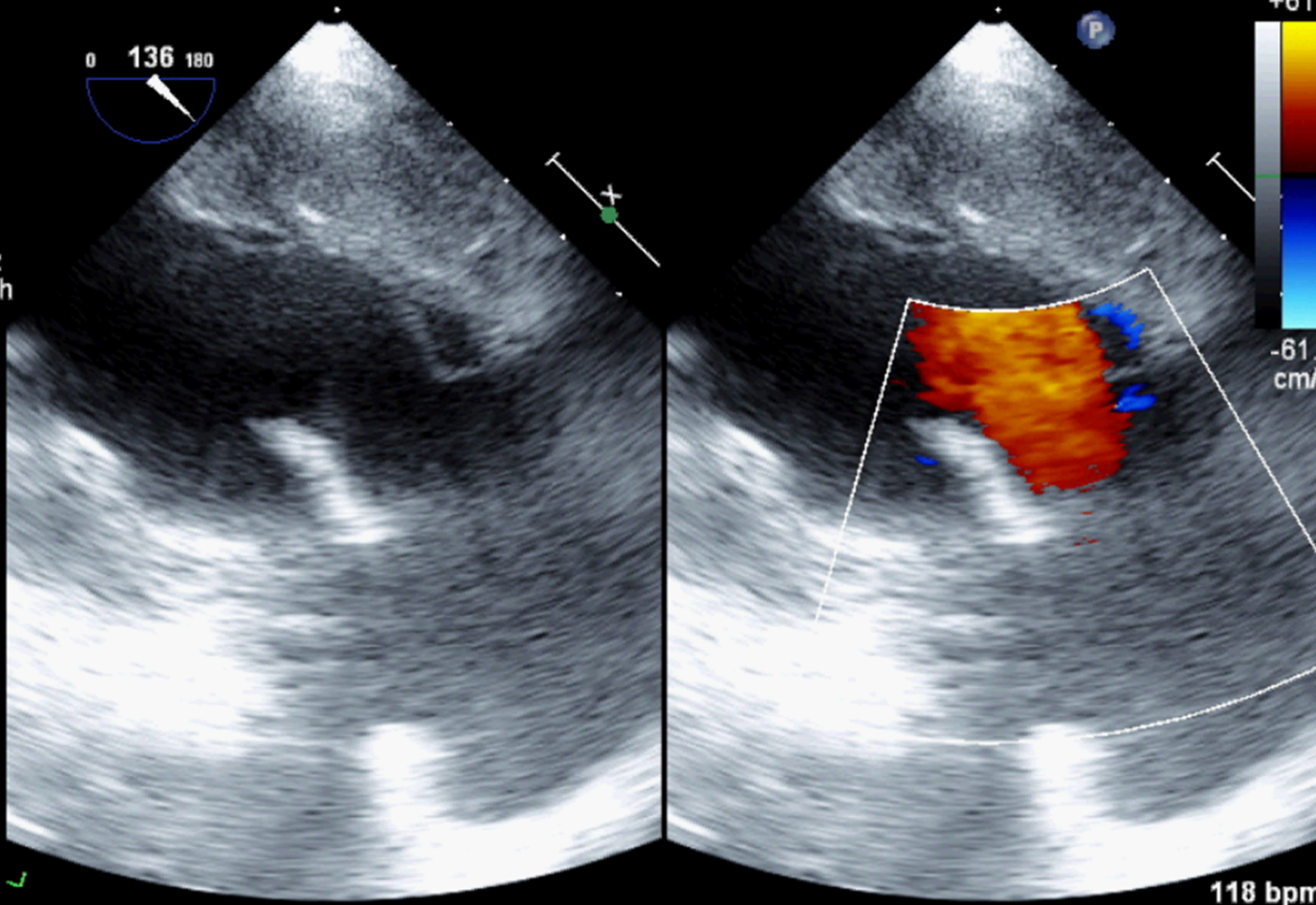
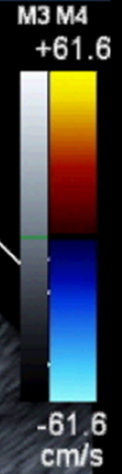
16/11/2017 12:33:49 PM  
HR : 118

TIS1.2 MI 0.6<sup>L</sup>

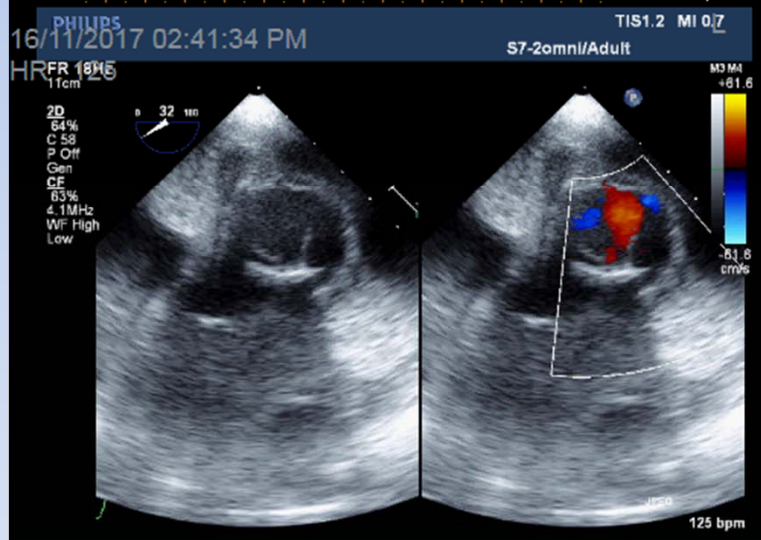
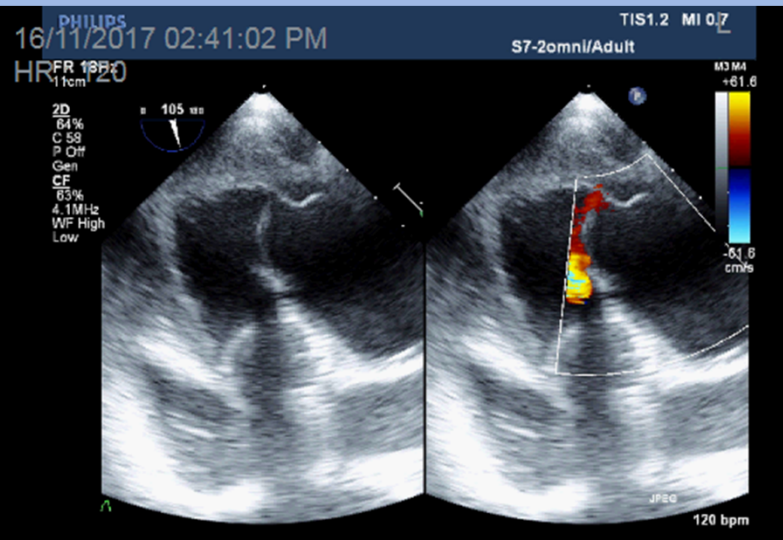
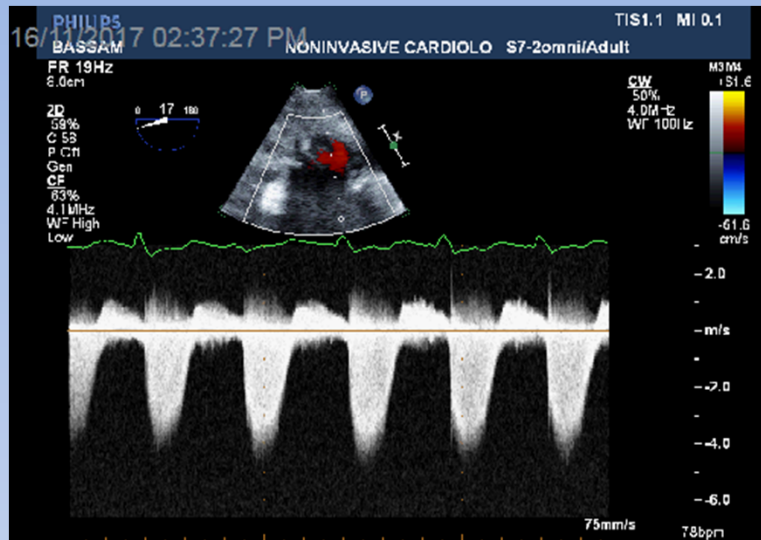
S7-2omni/Adult

FR 18Hz  
11cm

**2D**  
73%  
C 58  
P Off  
Gen  
**CF**  
63%  
4.1MHz  
WF High  
Low

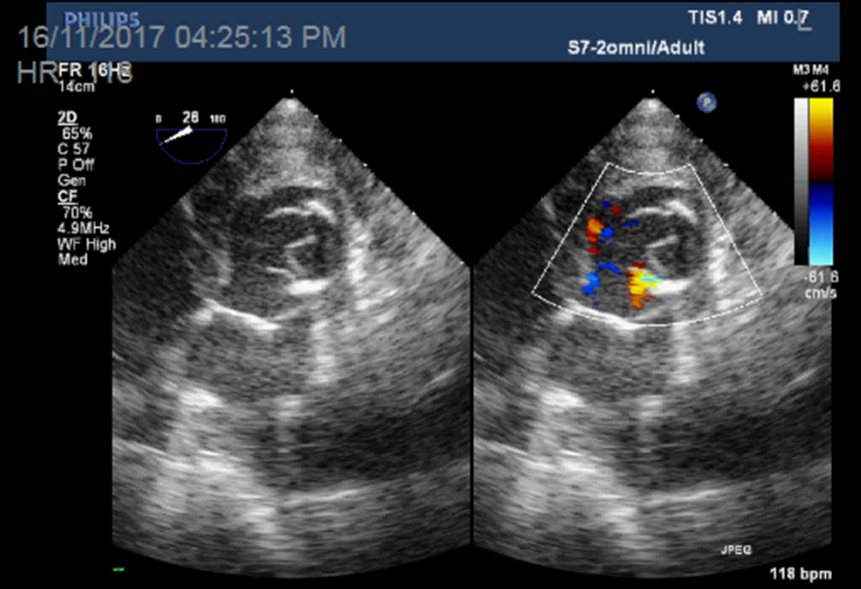
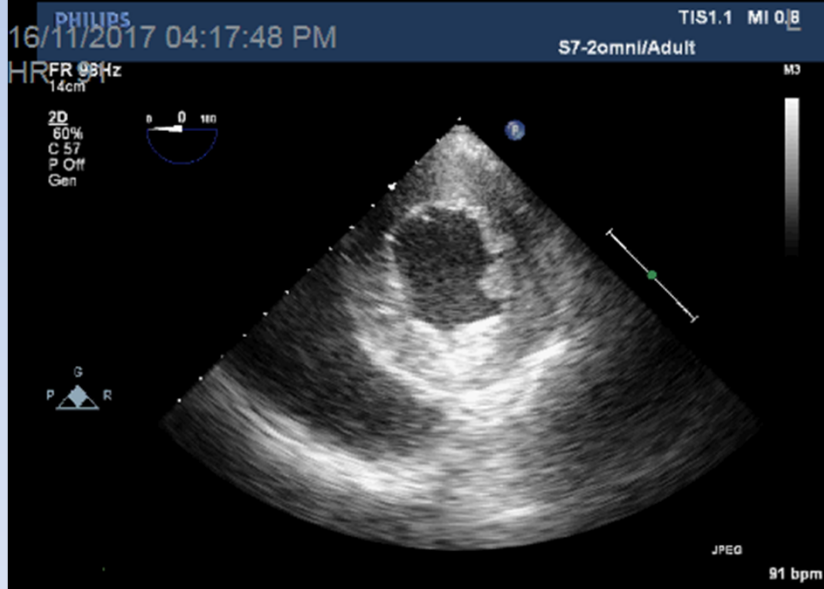
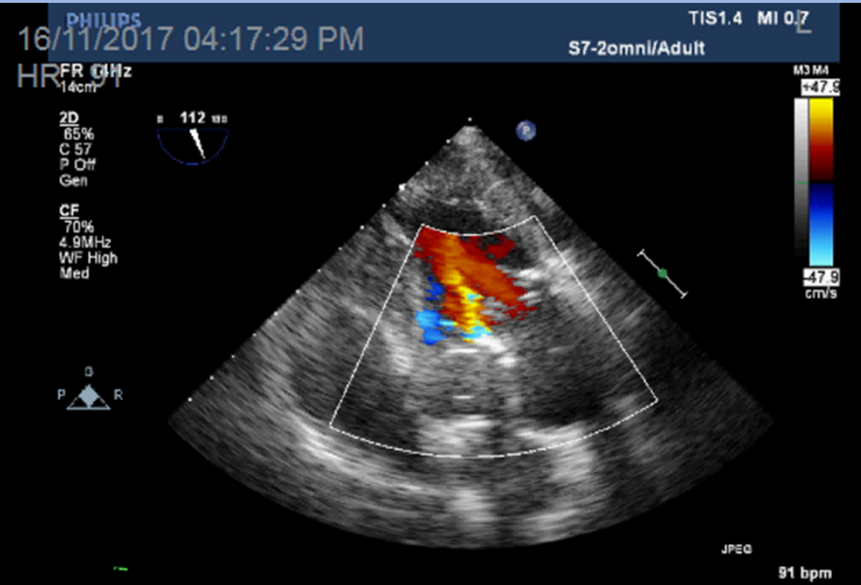
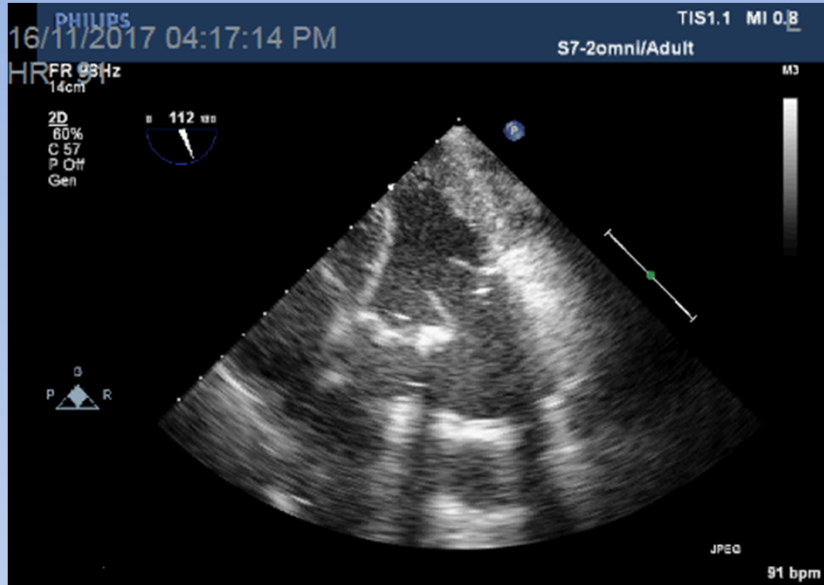


118 bpm



***2 hours later***

MV Bioprosthesis size 29



# Papillary muscle rupture

- **Rare complication of acute MI.**
- **New systolic murmur and CHF day3-5 post MI.**
- **Usually (82%) first coronary event in patients without collateral circulation ; 50% 1 vessel disease.**
- **Often small area of necrosis.**
- **Poor prognosis ( 90% mortality) and depends on extent of rupture.**