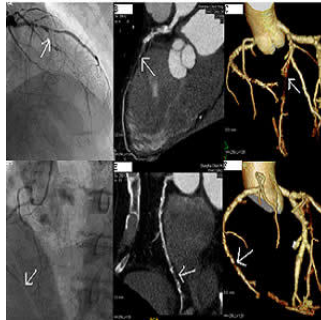


## New Appropriate Use Criteria for Coronary Revascularisation



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The American College of Cardiology and several partner organisations have released updated appropriate use criteria for performing coronary revascularisation in patients with acute coronary syndromes (ACS). The document includes clinical scenarios that are scored to indicate whether revascularisation is appropriate, may be appropriate or is rarely appropriate for the clinical scenario presented. The new criteria are published online in Journal of the American College of Cardiology.

**See Also:** [Towards Optimal Management of Left Main Coronary Artery Disease](#)

The criteria serve as an overall guide and physicians should evaluate each case on an individual basis, according to the writing committee, which is headed by Manesh R. Patel, MD, FACC, FAHA, FSCAI, chief of the division of cardiology and co-director of the Duke Heart Center at Duke University.

"This update provides a reassessment of clinical scenarios that the writing group felt to be affected by significant changes in the medical literature or gaps from prior criteria," explains Dr. Patel. The clinical scenarios have been developed to mimic patient presentations that may be encountered in everyday practice and information on symptom status, presence of clinical instability or ongoing ischaemic symptoms, prior reperfusion therapy, risk level as assessed by noninvasive testing, fractional flow reserve testing, and coronary anatomy.

Patients with ACS suffer from sudden, reduced blood flow to the heart, requiring quick diagnosis and care. Coronary revascularisation is the restoration of this blood flow to the heart commonly by coronary artery bypass graft or percutaneous coronary intervention.

"The primary objective of the appropriate use criteria is to provide a framework for the assessment of practice patterns that will hopefully improve physician decision making and ultimately lead to better patient outcomes," adds Dr. Patel. Also, the document can help to better inform patients about their treatment options. It is important for patients to discuss revascularisation and engage in shared decision making with their provider to come to a decision on the best treatment plan.

The document is part one of a two-part revision for coronary revascularisation. The updated appropriate use criteria for coronary revascularisation in patients with stable ischemic heart disease are forthcoming.

Source: American College of Cardiology  
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