



BY
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The central part of the slide contains two photographs. The top photograph shows a yellow sign with the words 'EMERGENCY' and 'CODE BLUE' in large, bold letters, with a red heart symbol and the text 'Card Support Services' below it. The bottom photograph shows a surgical team in an operating room, with several surgeons in green scrubs and masks performing a procedure on a patient lying on an operating table. The 'Cardio Azhar' logo is visible in the top right corner of this section.

Clinical data



- Female patient 58 Yrs old, Hypertensive.
- Not diabetic .
- NSTEMI , ECG : ST depression at anterior chest leads.
- Echo: normal LVSF , EF 65 % , RWMA (hypokinetic anterior wall and septum) .
- Normal renal function , no comorbid condition .
- PCI to LCX was done one year ago .
- She is on DAP , BB , nitrates and statin .

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SYNTAX Score overview

The SYNTAX Score has been calculated successfully for this patient.
Please note that this anatomy was not covered in the SYNTAX Trial.

Print results, or save as PDF
The fields below are optional

Patient ID:

Name:

Date of birth:

Continue with next patient
Current data will be lost, please print/save first.

SYNTAX SCORE II
Incorporate anatomical SYNTAX Score in SYNTAX Score II

Leave application

SYNTAX Score I

Lesion 1	
Segment 4): 3.5x2=	7
Segment 7): 2.5x2=	5
Length >20 mm	1
heavy calcification	2
Sub total lesion 1	15
TOTAL:	15

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- Type 1: Single-strut fracture
- Type 2: ≥ 2 strut fractures without deformation
- Type 3: ≥ 2 strut fractures with deformation
- Type 4: Multiple strut fracture with acquired transection but without gap
- Type 5: Multiple strut fractures with acquired transection with

Background

Stent restenosis

Stent fracture

Stent thrombosis

Coronary aneurysm

Guidelines 2014



Type I	Extraluminal crater without extravasation	
Type II	Pericardial or myocardial blush without contrast jet extravasation	
Type III	Extravasation through frank (>1 mm) perforation	
*Type III cavity spilling (CS)	Perforation into an anatomic cavity, chamber, coronary sinus, etc.	

*Sometimes referred to as Type IV

If complicate



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KNOWLEDGE

TEAM WORK

KEEP YOUR ACCESS
AND WAY

KNOW YOUR
BOUNDRIES



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-
- So , for this case :
 - Protamine- 1-1.5 mg per 100 USP units of heparin; not to exceed 50 mg (to achieve an activated clotting time of less than 150 seconds).
 - Keep your weapons in place .
 - Rapid react , but not over react .

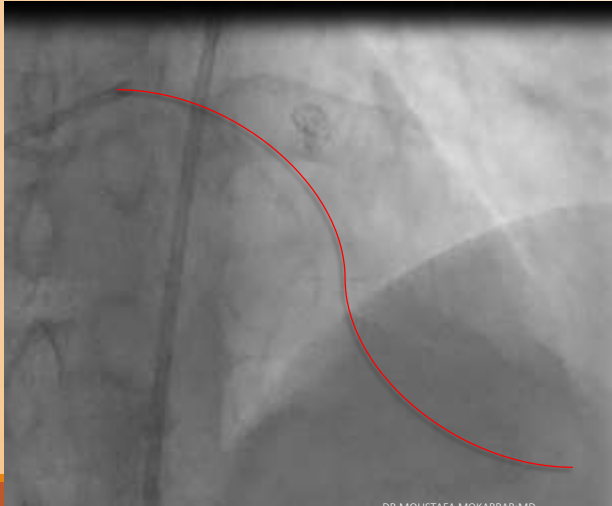
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Weapons



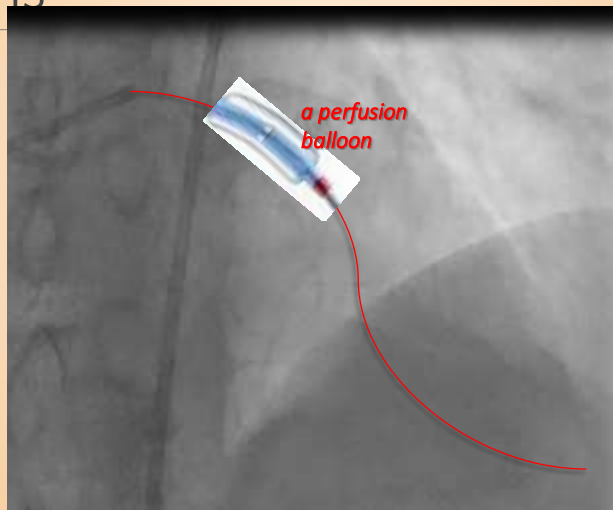
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Weapons



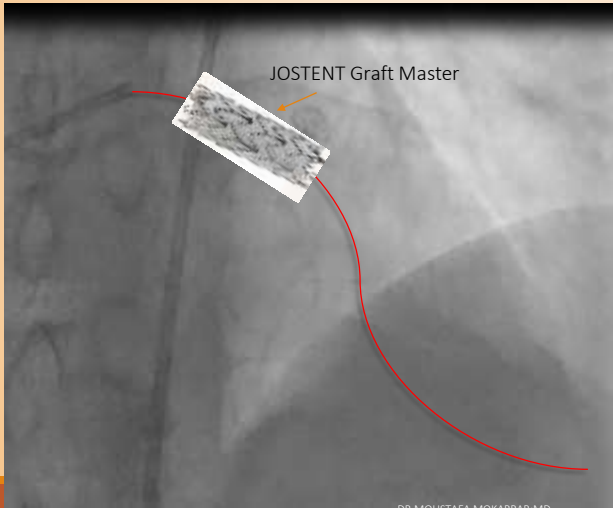
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Weapons



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Weapons



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Weapons



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Be careful

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- The patient transferred to CCU .
- Follow Echo was done serially during first and 2nd day , no further PE effusion.
- Discharged after 3 days in a stable condition.

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Home massage



- In Catha. Lab Complications:
Open your mind, Dilate your approach, and Facilitate your decision .
- If you know you can deal and treat.
- Team work = a key of success .
- Appropriate equipment's , minimize or prevent a complication.
- In treating a complication : Go big or Go home.

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