

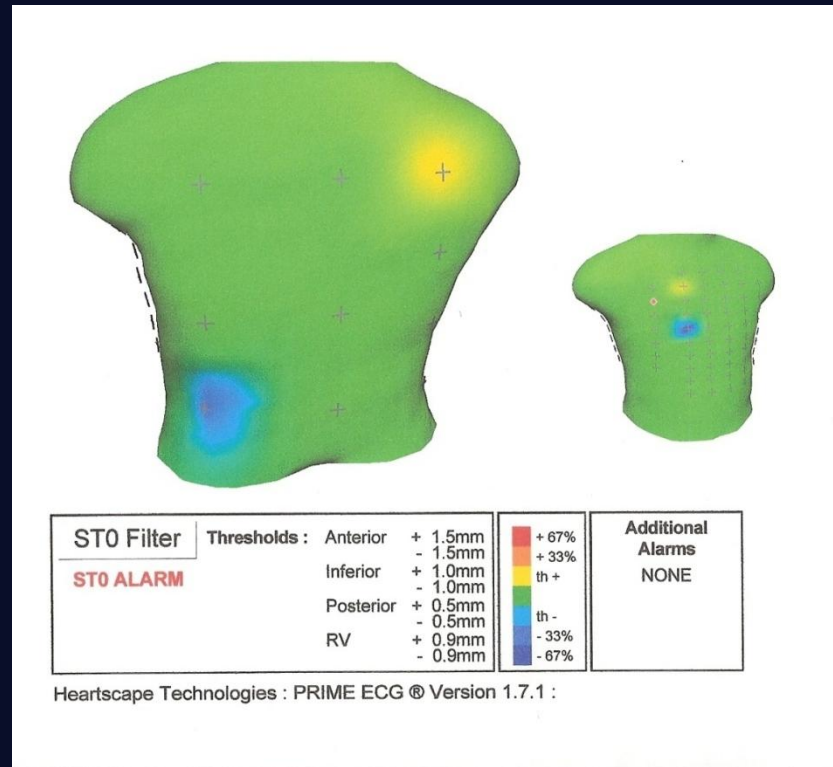
Increasing Ischemic ST Deviations detected in Posterior Region with Serial PRIME Maps

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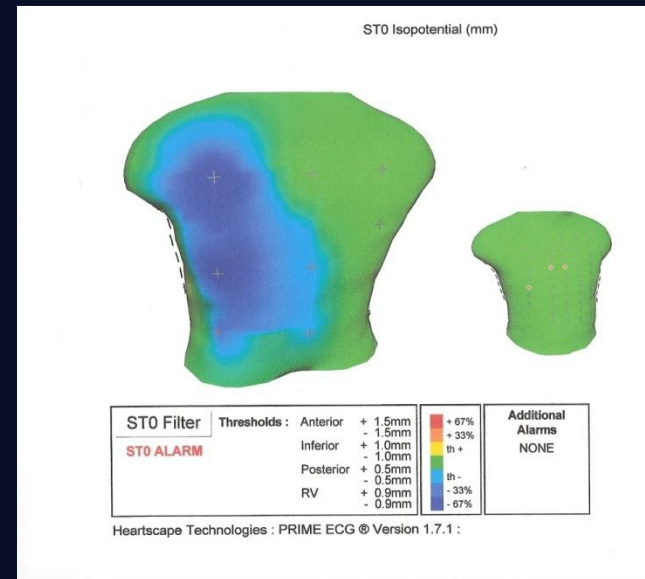
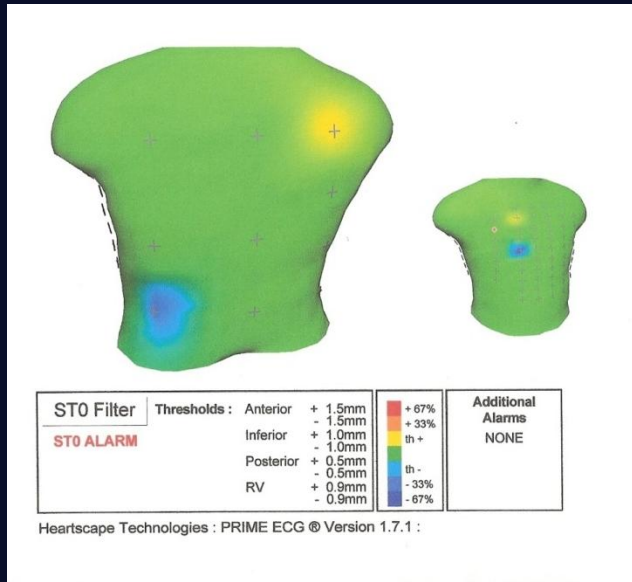
- 7:04 45 year old diabetic male
History of prior CABG
3 days of intermittent chest pain
Returned tonight

- 7:10 Initial ED 12 lead
NSR, occasional PVCs and PAC's

Frank Peacock, acting as a paid consultant to HeartScape Technologies, Inc., authored this case review based on actual data, physician notes and images extracted from the medical record of a specific patient. Images and physician findings and conclusions have not been altered.



- 7:18 PRIME obtained, showed LAFB & marked Left Axis Deviation (LAD); Cardiology consulted
- 7:25 Cardiology Fellow arrived
- 7:30 Ongoing symptoms, cardiology requested repeat PRIME



7:35 Read as LAFB with marked LAD; Area of ST Depression had markedly grown within ~15 minutes

7:50 Decision to take to cath lab

8:15 Labs return positive CK, CKMB, & Tn

8:40 To cath lab

Cath Lab Report

- Patient with prior CABG
 - LIMA to LAD graft with 99% stenosis.
 - Native LAD with 95% stenosis
 - RCA (non- dominant) with 80% stenosis
 - CX artery 40% stenosis
 - OM1 and OM2 with 99% stenosis
- EF 45% with moderate hypokinesis of the anterior wall
- Underwent PCI of LIMA to LAD graft
- Recommended aggressive medical management.