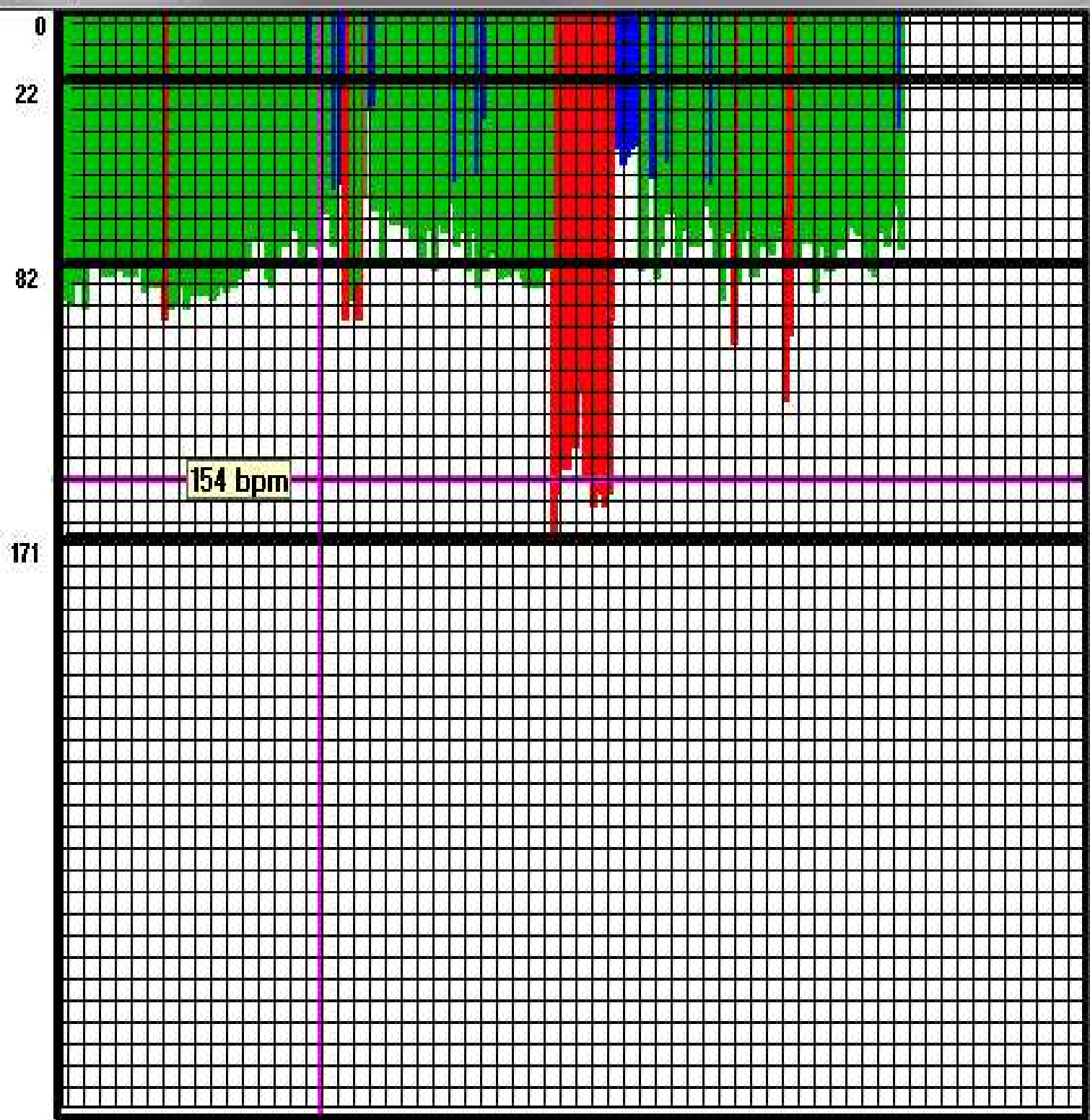


File Callipers

The image displays a grid of 20 rows, each containing 20 vertical double-headed arrows. The arrows are arranged in a regular, alternating pattern of up and down directions across the rows. The grid is bounded by thick red horizontal lines at the top and bottom of each row. The background is a light gray grid.

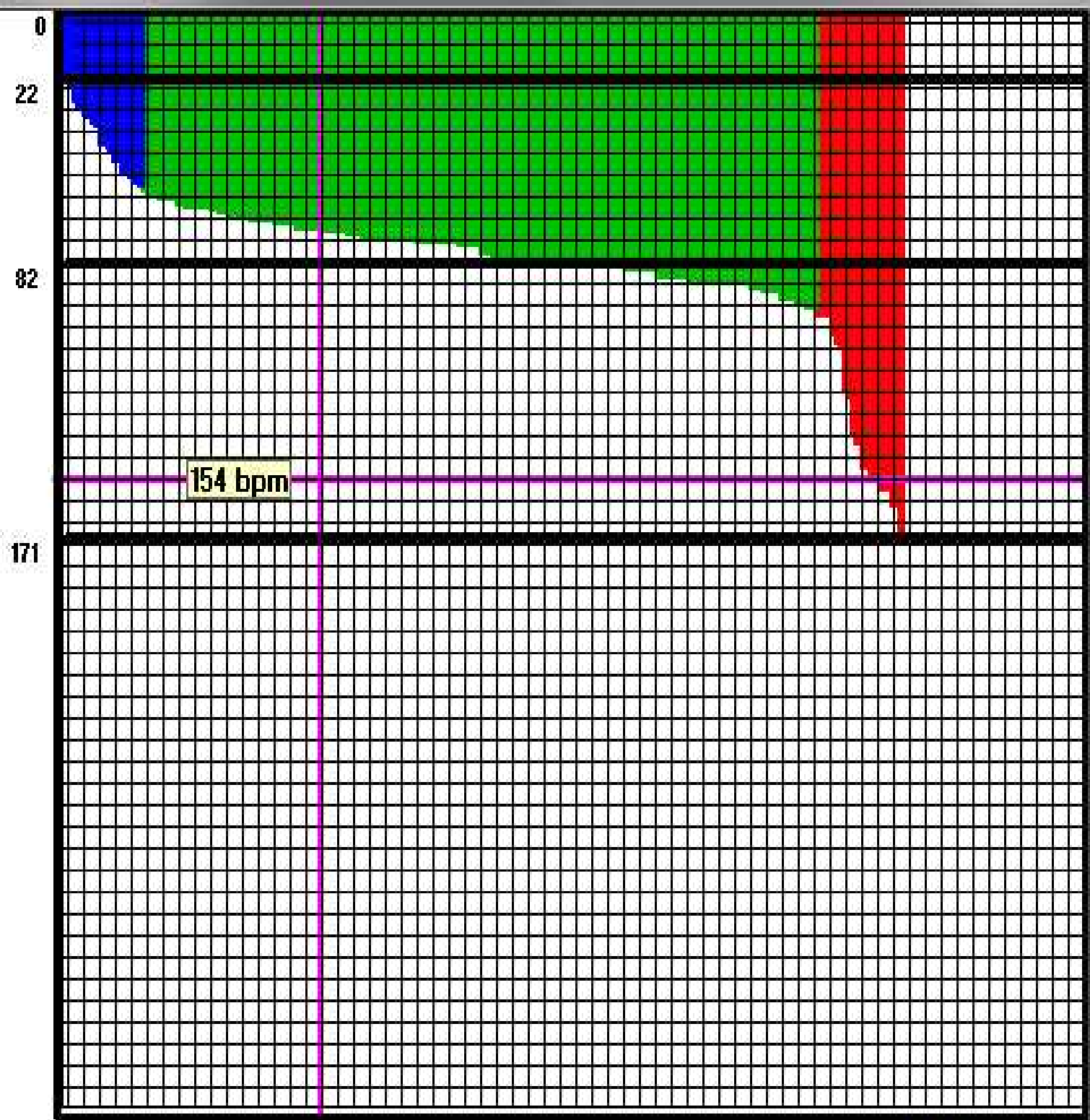


Duration = 17992 milliseconds

Sequential Graphic Data

OK

- AR < 60
- AR 60-100
- AR > 100



Duration = 17992 milliseconds

Sorted Graphic Data

OK

- AR < 60
- AR 60-100
- AR > 100

Data Analysis

Duration = 17992 milliseconds

Total Beats = 226 beats

Min Heart Rate = 22 beats/min

Max Heart Rate = 171 beats/min

Mean Heart Rate = 82.29 beats/min

Variance = 578.6946

Standard Deviation = 24.05

The rhythm is extremely irregular. AF Possible!

Chad2 Score Calculation in Non-valvular Atrial Fibrillation



Have you had Congestive Heart Failure recently (6mo)?

No

Do you have High Blood Pressure (Hypertension)?

No

Do you have Diabetes Mellitus?

No

Have you had a Stroke or TIA in the past?

No

Are you 75 years of age or older?

No

Chad2 Score =

0

Adjusted Stroke Rate =

1.9

per 100 patient years

95% Confidence Interval =

1.2 - 3.0



Framingham Stroke Risk



Male or Female:

M

Cardiovascular Ds (y/n)

N

Age (years):

56

Atrial Fibrillation (y/n)

N

Systolic Blood pressure:

112

LVH on ECG (y/n)

N

Blood Pressure Rx (y/n)

N

Smoke cigarettes (y/n)

N

Diabetic (y/n):

Y

Calculate Risk

Save / OK

Cancel

Total Point Score is: 3 from a maximum of 38

The 10 Year Probability for Stroke is 4%

Stroke risk profile: adjustment for antihypertensive medication: the Framingham Study.

New evidence of stroke prevention. Scientific review.

Updated Risk Profile of D'Agostino et al for Stroke Risk Within 10 Years

Diabetes Stroke Risk



Age (years):

Cholesterol mmol/L

Male or Female:

HDL Cholesterol mmol/L:

Smoke cigarettes (y/n)

Atrial Fibrillation (y/n)

How many yrs of Diabetes

Systolic Blood pressure:

Cholesterol/HDL ratio:

The Diabetic's Stroke Risk = 0.3% in 5 yrs

The Diabetic's Stroke Risk = 0.9% in 10 yrs

The Diabetic's Stroke Risk = 4.6% in 20 yrs

Risk of stroke in type 2 diabetes estimated by the UK Prospective Diabetes Study Risk

Risk of Stroke in a Patient with Type 2 Diabetes Mellitus in the UKPDS

Transient Ischemic Attack (TIA) Risk of Stroke



Age (years)	<input type="text" value="56"/>	Weakness with TIA?	<input type="text" value="N"/>
Diabetic (y/n):	<input type="text" value="Y"/>	Trouble Speaking TIA?	<input type="text" value="Y"/>
TIA Longer than 10 min?	<input type="text" value="Y"/>		

Calculate Risk

Save / OK

Cancel

TIA Score = 3 from a maximum of 5

Risk of Stroke within 90 days is 11%

Short-term prognosis after Emergency Department diagnosis of TIA

Short Term (90 Day) Risk of Stroke in Patients with Transient Ischemic At medal.org

Elderly Bleeding Risk with Warfarin



Age (years):	<input type="text" value="56"/>	Alcohol / Drug Abuse?	<input type="text" value="Y"/>
Male or Female:	<input type="text" value="F"/>	Diabetes?	<input type="text" value="Y"/>
Bleeding in the past?	<input type="text" value="N"/>	Anemia (Hct < 30)?	<input type="text" value="Y"/>
Bleeding recently?	<input type="text" value="Y"/>	Antiplatelet Meds?	<input type="text" value="Y"/>

Calculate Risk

Save / OK

Cancel

The Risk Score for Bleeding in this 56 yo F is: 2.78

The Risk Score range is between 0 - 4.17.

The Risk of Bleeding is HIGH.

Development of a contemporary bleeding risk model for elderly warfarin recipients

Bleeding Risk Model of Shireman et al (medal.org)

Adjustment of Warfarin Dosage

X

Today's INR:

Desired INR:

Present Warfarin Dosage: mg

Adjust Dosage

New Dosage: mg Warfarin

Followup

Save / OK

Cancel

Computer control of anticoagulant dose for therapeutic management

Prospective comparative study of computer programs used for management

Dosing Algorithm of Ryan et al (medal.org)

Initiation of Warfarin Dosage



Day #1: If $INR < 1.4$ then give 10mg Warfarin by mouth at 5PM.

(Usually day #3 Heparin)

Day #2: Check INR at 9AM or 16 hours after first dosage.

INR

1

Day #2 Warfarin Dosage

10.0

mg at 5PM

Day #3: Check INR at 9AM or 16 hours after second dosage.

INR

1

Day #3 Warfarin Dosage

10.0

mg at 5PM

Day #4: Check INR at 9AM or 16 hours after second dosage.

INR

3

Day #4 Warfarin Dosage

4.0

mg at 5PM

Commentary

Save / OK

Cancel

Flexible induction dose regimen for warfarin and prediction of maintenance dose.

Induction and Maintenance Dosing of Oral Anticoagulants Using the Method of Fennerty et al

The Outpatient Bleeding Risk Index



Age (years):

56

Anemia (Hct < 30)?

Y

History of Stroke?

N

Kidney Failure (cr >1.5)?

Y

History of GI bleeding?

N

Diabetes?

N

Recent Heart Attack?

N

Calculate Risk

Save / OK

Cancel

You have a total of 1 from a possible maximum of 4.

You have a **INTERMEDIATE** Risk for Major Bleeding of

5% in 3 Months and 12% in 12 months.

The outpatient bleeding risk index

The Outpatient Bleeding Risk Index of Beyth et al (medal.org)