

C-53 Management of a High Risk Cardiac Patient Undergoing a Delayed Right Hip Fracture Repair

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Objective

After completion of this session, the participant will be able to:

- Assess the patient for perioperative cardiac risk assessment based on the current ACC/AHA clinical practice guidelines.

Case Stem Question

80 y.o. male with pmhx HTN, HLD, DM, known CAD s/p CABGx3V 2005, s/p AAA repair 2015 c/b NSTEMI, pAF on AC, CHF EF 30%, AS s/p TAVR in 2013 now BIBEMS from a nursing for R leg pain for 1 day. Found to have an intertrochanteric fracture. Simultaneously the patient was found to have an NSTEMI which progressed to cardiogenic shock and he was admitted to the ICU for further management. Surgery was delayed for four weeks due to ongoing cardiac instability. Throughout his hospital stay the patient continued to request surgery for the hip fracture in order to improve mobility & pain despite his high risk for cardiac complications and death. On day 21 of hospitalization the patient was scheduled for a right hip ORIF.

Guiding Questions for Discussion

Would you proceed with the planned surgical procedure and what are your concerns?

Would you have a discussion with the patient and his family?

The patient is already 4 weeks post injury, would this information support your decision of not proceeding with the case?

Should the patient's autonomy be the only factor driving decision making?

Can you offer any alternatives for pain control other than the planned surgical fixation

In your opinion what is the safest anesthetic for this patient?

Would you give TXA to this patient if requested by the surgeon? Why?

Would you use any invasive monitors for this case and why?

Based on the ACC/AHA clinical practice guidelines how do you feel about the patients current cardiac risks considering his recent NSTEMI

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