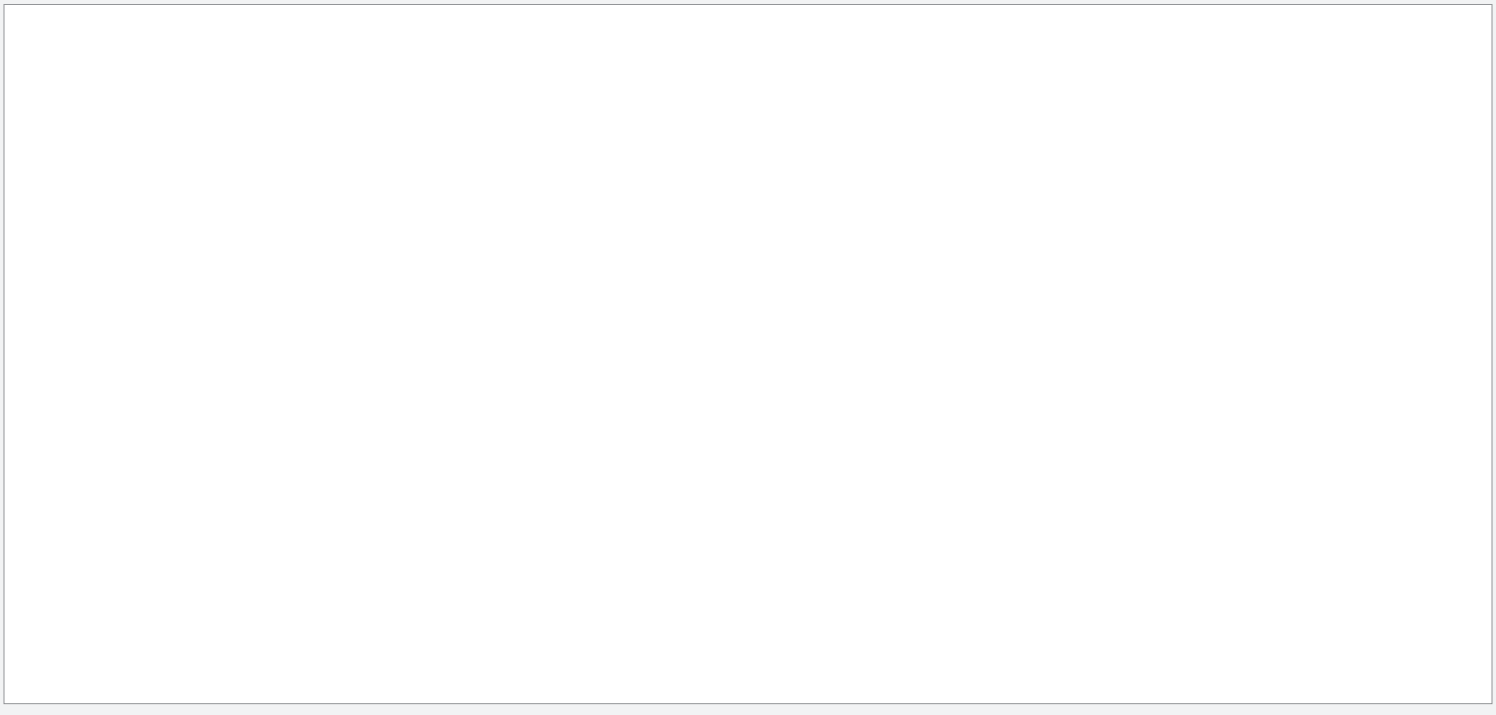

NALOXONE IN CPR TRAINING AND AED PLACEMENT

The opioid crisis calls for comprehensive measures to combat the rising pace of misuse, addiction and overdose related deaths. Even though initial positive results of naloxone access eelat oortsesul en (omb)21(2elag)or

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CORONARY ARTERY CALCIUM SCORING

Cardiac computed tomography, commonly known as a cardiac CT scan, is utilized to take images of a patient's beating heart to visualize their cardiac anatomy, coronary circulation and great vessels. Cardiac CT scans are commonly used by clinicians to evaluate the state of a patient's heart muscle, coronary arteries, pulmonary veins, pericardium, and thoracic and abdominal aorta. 4s¶k~ °rk k¸s-°s~q f¡i¹ ¡pk¶sik~gk ¡~°rk©¬¡gki±¬kû- g¡-°ì ^~i g{s~sg^{ìkppkg°s¶k~k-- s~ gk¬°^s~ -s°±^°s¡~-ø°rk !5! -±©©¡¬°- kpp¡¬°- to expand coverage of and appropriate payment for coronary artery calcium (CAC) tests across the payor continuum, especially p¡¬©^°sk~°- ·r¡ }sqr° fk~k¾° p¬¡ } z~¡·s~q °rks¬ -g¡¬k ^~i r^¶s~q it considered in care decisions made by their physician or team of healthcare providers, including:

- á ?k~ ^~i ·¡ }k~ ¡p^{{ ^qk- ·s°r rsqr gr¡{k-°k¬¡{ ·r¡ ^¬k ¬k{±g°^~° to begin statin therapy and who want to understand their risks and ©¡°k~°s^{ fk~k¾°- ¡p } kisg^°s¡~ °rk¬^©¹ } ¡¬k©¬kgs-k{¹Ú
- á ?k~ ^~i ·¡ }k~ ¡p^{{ ^qk- ·s°r rsqr gr¡{k-°k¬¡{ ·r¡ ^¬k gi~gk¬~ki ^f¡±°¬kì-°^¬°s~q -°^°s~ °rk¬^©¹ ^p°k¬ -°¡©©s~q treatment because of side effects;
- á ?k~ ^qk- ËË°¡ ÎÆ¡¬ ·¡ }k~ ^qk- ÌÆ°¡ ÎÆ ·s°r rsqr gr¡{k-°k¬¡{ø but few or no other risk factors for having or developing ASCVD, ·r¡ «±k-°s¡~ ·rk°rk¬°rk¹ ·¡±{i fk~k¾° p¬¡ } -°^°s~ °rk¬^©¹Ú ^~i
- á ?k~ ^~i ·¡ }k~ ^qk- ÊÆ°¡ ËË ·s°r ^g^{g±{^°ki ÇÆì¹k^¬¬s-z estimate for ASCVD between 5 percent and 7.5 percent, as calculated using the ASCVD Risk Calculator, and added risk factors (e.g., smoking, hypertension, diabetes, being overweight, lack of physical activity) that increase their chances of having or developing coronary artery disease.

The ACC/AHA do not generally recommend CAC testing of ^-¹ }©°¡ } ^°sg©^°sk~°- ·r¡ ^¬kg{^--s¾ki ^- ó{¡· ¬s-zô ¡¬órsqr ¬s-zô as the score is unlikely to provide any new or additive information that would be useful s~ ikps~s~q ^©^°sk~°û- ¬s-z ¡¬ isgkg°s~q ^ personalized treatment plan.

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3 THING TO KNO\

1. 6~ @¡¶k } fk¬ ÈÆÇÎø°rky¡s~° American College of Cardiology (ACC)/American Heart Association (AHA) Task Force on Clinical Practice Guidelines s--±ki ~k· gr¡{k-°k¬¡{ì¬k{^°ki recommendations supporting the use of cardiac CT scans to produce CAC scores for certain ^°ì¬s-z©^°sk~°-x

2. Prk ~k·{¹ì¬k{k^-ki q±sik{s~k- lead clinicians through a process, using a calculated formula and taking into account known risk factors, to place a patient in one of p¡±¬g{^--s¾g^°s¡~- ¡p¬s-zÙ{¡·ø borderline, intermediate or high.

3. 3¡¬©^°sk~°- g{^--s¾ki ^- ^~ "intermediate risk" for having or developing atherosclerotic cardiovascular disease (ASCVD), the guidelines suggest that patients and clinicians consider CAC scoring as a tool for providing a greater degree of certainty as to whether statin use is medically necessary and clinically appropriate to prevent or decrease the risk of an adverse event.