

QUESTION
 A 65-year-old male patient with a long history of hypertension and hyperlipidemia presents to the emergency department with acute chest pain. The patient reports a 15-minute episode of severe, crushing chest pain that radiates to the left arm and jaw. He has a history of smoking 20 cigarettes per day for 30 years and has been on a low-dose aspirin regimen for several years. His vital signs are stable, and his ECG shows ST-segment depression in leads II, III, and aVF. The patient is currently on a beta-blocker, a calcium channel blocker, and a statin.

ANSWER
 The patient's presentation is consistent with a non-ST-elevation myocardial infarction (NSTEMI). The key features include acute chest pain with radiation, ST-segment depression on ECG, and a history of cardiovascular risk factors. The patient is currently on a beta-blocker, a calcium channel blocker, and a statin. The management of NSTEMI involves aspirin, P2Y12 inhibitors, and statins.

ANSWERS

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