

**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 aspirin therapy for several years. His vital signs are stable, and his ECG shows ST-segment depression in leads II, III, and aVF. The patient's blood pressure is 140/90 mmHg, heart rate is 78 bpm, and oxygen saturation is 98% on room air.

Parameter	Value	Reference Range
ECG	ST-segment depression in leads II, III, and aVF	None
Blood Pressure	140/90 mmHg	90-120/60-80 mmHg
Heart Rate	78 bpm	60-100 bpm
Oxygen Saturation	98% on room air	95-100%
ECG	Normal sinus rhythm	Normal sinus rhythm
ECG	Normal Q waves	Normal Q waves
ECG	Normal ST-segment	Normal ST-segment
ECG	Normal T waves	Normal T waves

## ANSWER



**EXPLANATION**  
 The patient's symptoms and ECG findings are consistent with a non-ST-elevation myocardial infarction (NSTEMI). The ST-segment depression in leads II, III, and aVF is a characteristic ECG finding in NSTEMI. The patient's history of hypertension and hyperlipidemia, along with his long-term smoking and aspirin use, are risk factors for coronary artery disease.