

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 pain is described as a heavy, crushing pressure in the center of the chest, lasting for approximately 30 minutes. The patient reports no radiation of pain to the left arm or jaw. He has a history of smoking 20 cigarettes per day for 30 years and consumes alcohol occasionally. His medical history is significant for a previous myocardial infarction 10 years ago, treated with percutaneous coronary intervention. He is currently on aspirin, beta-blockers, and statins. On arrival, the patient is conscious and oriented, with a blood pressure of 180/100 mmHg, a heart rate of 110 bpm, and an oxygen saturation of 92% on room air. ECG shows ST-segment depression in leads II, III, and aVF, and ST-segment elevation in leads V1 and V2. Troponin I is elevated. The patient is diagnosed with a non-ST-elevation myocardial infarction (NSTEMI).

Parameter	Value
Age	65 years
Sex	Male
Weight	80 kg
Height	175 cm
BMI	26.1
Blood Pressure	180/100 mmHg
Heart Rate	110 bpm
Oxygen Saturation	92% on room air
ECG	ST-segment depression in leads II, III, and aVF; ST-segment elevation in leads V1 and V2
Troponin I	Elevated

What is the most appropriate initial management for this patient?

ANSWER



What is the most appropriate initial management for this patient?