

Safety of PERC tool validated for very low risk PE rule out in ER

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(HealthDay)—For low risk patients with suspected pulmonary embolism

(PE), randomization to eight-item PE rule-out criteria (PERC) seems safe, according to a study published in the Feb. 13 issue of the *Journal of the American Medical Association*.

Yonathan Freund, M.D., Ph.D., from the Sorbonne Université in Paris, and colleagues conducted a non-inferiority trial in 14 emergency departments in France to validate the safety of PERC-based strategy to rule out PE. A total of 1,916 [patients](#) were cluster-randomized: 962 were assigned to the PERC group and 954 to the control group.

The researchers found that a PE was diagnosed at initial presentation in 2.7 percent of patients in the control group, compared with 1.5 percent in the PERC group (difference, 1.3 percent; 95 percent confidence interval, -0.1 to 2.7 percent; $P = 0.052$). During follow-up, one PE was diagnosed in the PERC group versus none in the control group (difference, 0.1 percent; 95 percent confidence interval, $-\infty$ to 0.8 percent). In the PERC versus the [control group](#), the proportion of patients undergoing computed tomographic pulmonary angiography was 13 versus 23 percent (difference, -10 percent; 95 percent confidence interval, -13 to -6 percent; P

"These findings support the safety of PERC for very low risk patients presenting to the emergency department," the authors write.

Several authors disclosed financial ties to the pharmaceutical industry.

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