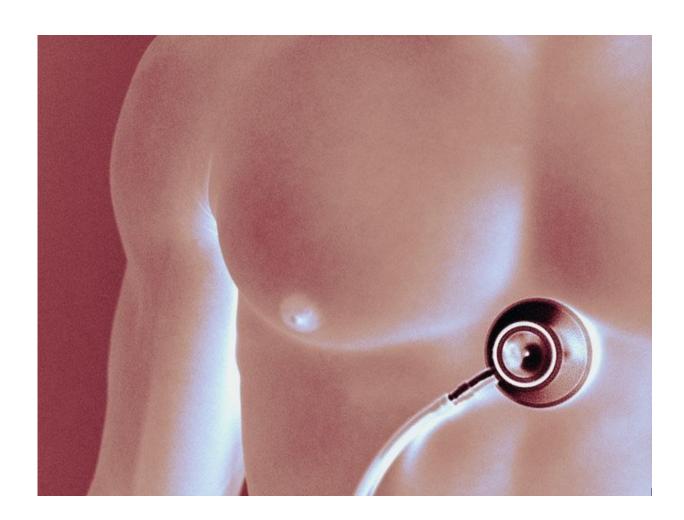


Stress echo safe for ER triage of patients with chest pain

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(HealthDay)—For patients presenting to the emergency department with



chest pain, a smaller proportion are hospitalized after undergoing stress echocardiography (SE) versus coronary computed tomography angiography (CCTA), according to a study published online June 13 in *JACC: Cardiovascular Imaging*.

Jeffrey M. Levsky, M.D., Ph.D., from Albert Einstein College of Medicine in Bronx, N.Y., and colleagues randomized low-to-intermediate-risk <u>emergency</u> department acute <u>chest pain patients</u> without known coronary artery disease and a negative initial serum troponin level to immediate CCTA (201 patients) or SE (199 patients).

The researchers found that 19 and 11 percent of CCTA and SE patients, respectively, were hospitalized at presentation (P = 0.026). For discharged patients, the median emergency department length of stay was 5.4 and 4.7 hours for CCTA and SE, respectively (P

"SE hospitalized a smaller proportion of patients with a shorter length of stay than CCTA and was safe. SE should be considered an appropriate option for <u>emergency department</u> chest pain triage," the authors write.

One author disclosed financial ties to Kryon.

More information: Abstract/Full Text (subscription or payment may be required)

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