

Practice Recommendations

- Unless contraindicated, pts should remain on ASA, β -blockers, and high-intensity statin after an ACS/MI for 2^o prevention (SOR A).
- Post-MI pts w/LVEF <40% should be placed on ACEI (ARB 2nd choice) + aldosterone antagonist indefinitely (SOR A).
- After ACS or revascularization (CABG, PCI), all eligible pts should be referred to a comprehensive outpt CV rehabilitation program prior to D/C or during 1st F/U office visit. (SOR A)