

What is it? A chart flag that may be affixed to your WellCare patients' inpatient charts by our concurrent nurse reviewers when they identify the patients as having had an AMI. The flag is a succinct reminder of treatment guidelines and preferred drugs.

Purpose: Help ensure that post-AMI members are started on Beta Blocker therapy and lipids are managed.



Attention Physician
ACUTE MYOCARDIAL INFARCTION

The American College of Cardiology (ACC) /American Heart Association (AHA) in Guidelines for the Management of Patients with AMI, 1999, recommends:

- **Beta blocker** therapy should be given within 12 hours of onset of an **AMI**, and continued indefinitely thereafter, unless contraindicated.

The Medical Letter on Drugs and Therapeutics in 2001 suggests:

- Use of **beta blockers** after AMI has been associated not only with increased survival, but also with lower rates of hospital readmission for heart failure.
- Treatment of clinical coronary artery disease with **statins** can reduce mortality and morbidity.
- Please consider treatment with **statins** if LDL-C is > 100

Preferred Drug List

Beta Blocker Therapy: Atenolol, Metoprolol, Propranolol

For Lipid Management:

Statins: Lovastatin, Simvastatin, Pravastatin, Lescol XL®, *Crestor®, *Lipitor®

Bile Acid Sequestrants: Cholestamine Resin, Colestid®

Niacin: Niacor®

Fibrates: Gemfibrozil, *Fenofibrate, *Lofibra®

Note: *=Drug on Medicare PDL only

WCPC-WCM-WMR-003 Revised 6.08