**PCI Complications: The Best of the Worst** 

# The Coronary that Spiraled out of Control

#### Daniel I. Simon, MD, FACC, FAHA, FSCAI

President, Harrington Heart & Vascular Institute
Chief, Division of Cardiovascular Medicine
University Hospitals Case Medical Center
Herman K Hellerstein Chair and Professor
Case Western Reserve University School of Medicine





### Disclosure Statement of Financial Interest

Within the past 12 months, I or my spouse/partner have had a financial interest/arrangement or affiliation with the organization(s) listed below.

Affiliation/Financial Relationship Company

Grant/Research Support Medtronic Foundation

Consulting Fees/Honoraria Medtronic
Major Stock Shareholder/Equity

**Royalty Income** 

Ownership/Founder Sujana Biotech

**Intellectual Property Rights** 

**Other Financial Benefit** 





## Case 1

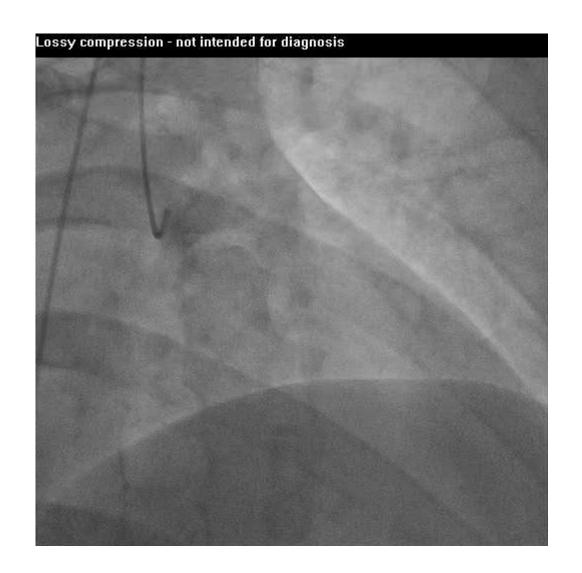
• Inferior STEMI





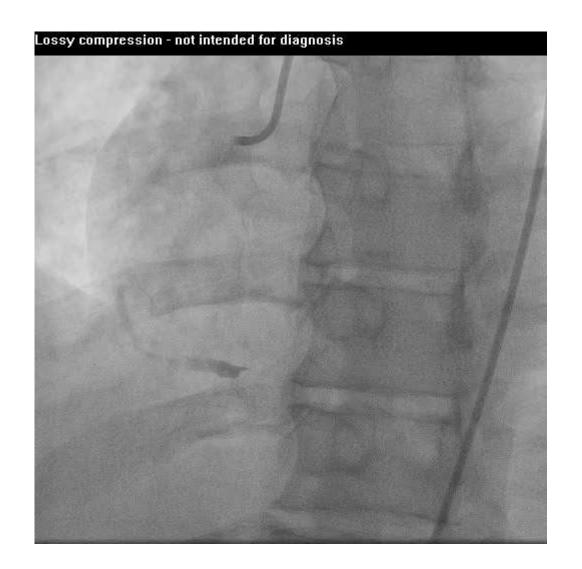


















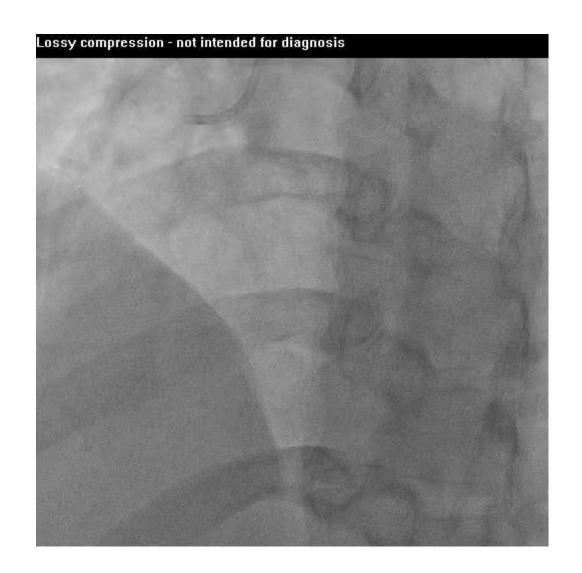




# Attending-Fellow conversation...

- Fellow: "Guide pressure is dampened. I can't draw back any blood."
- Attending: "That's strange. Guide pressure was OK on post-thrombectomy angiogram, wasn't it? I wonder if the thrombectomized clot is still in the guide. Let's withdraw everything as a unit—guide and wire."











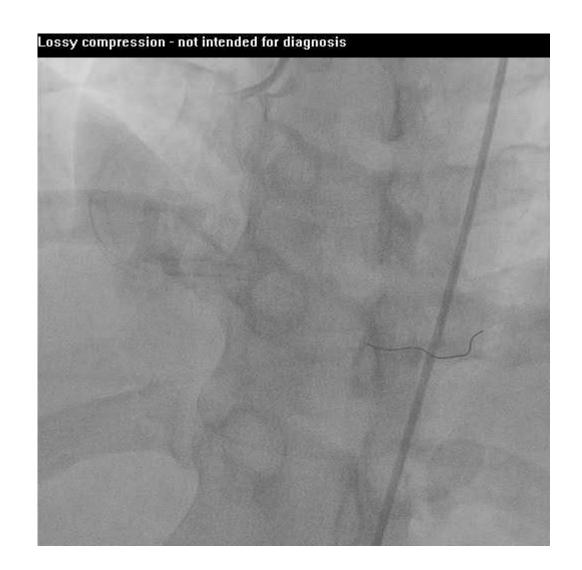


















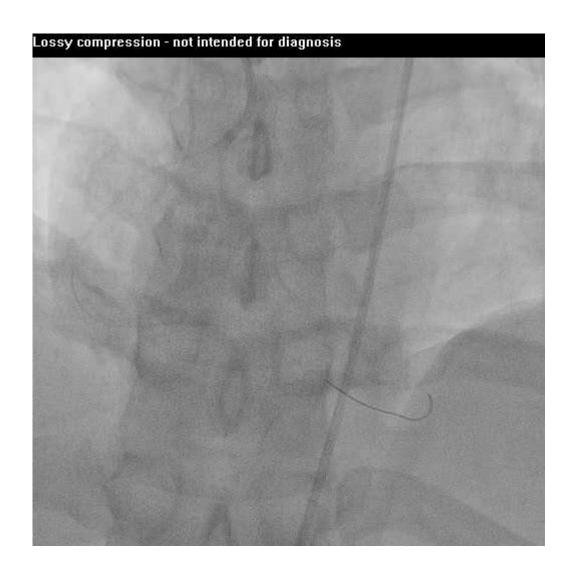












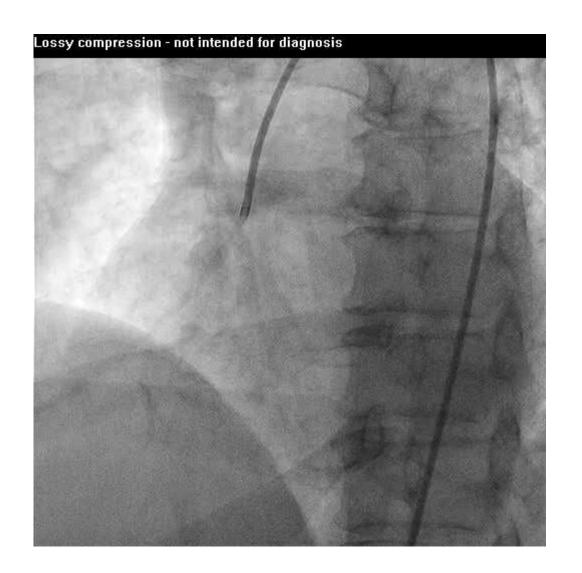




## Case 2

- Stable angina
- Diagnostic cath at C-PORT (without SOS) community hospital
- PCI recommended at academic medical center with SOS





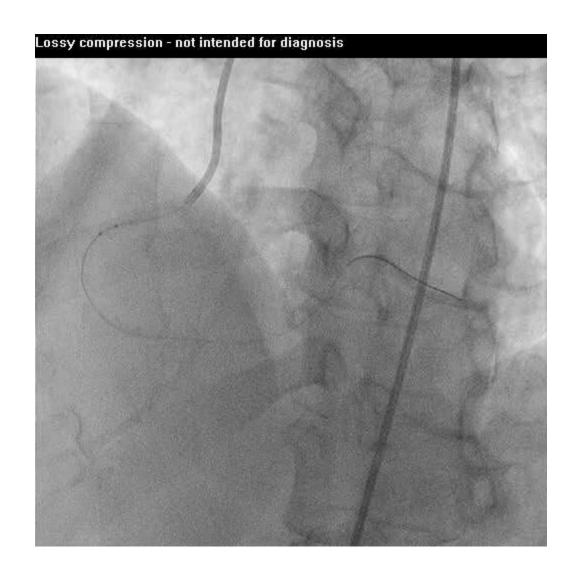












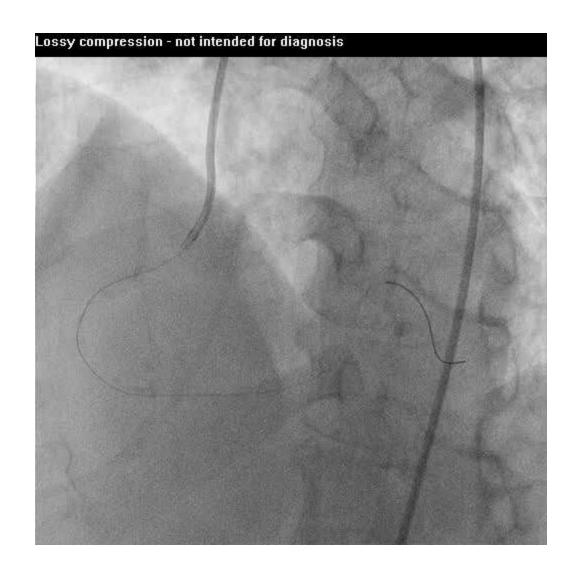






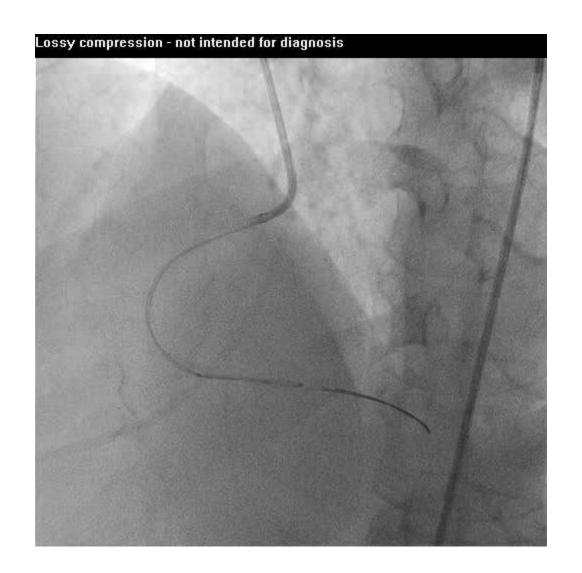






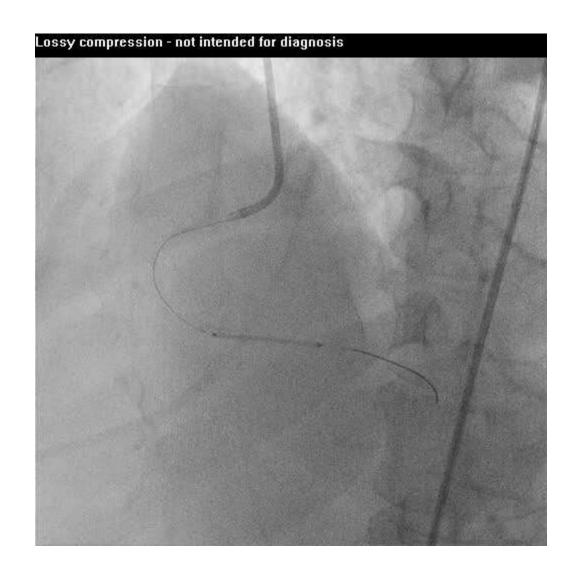






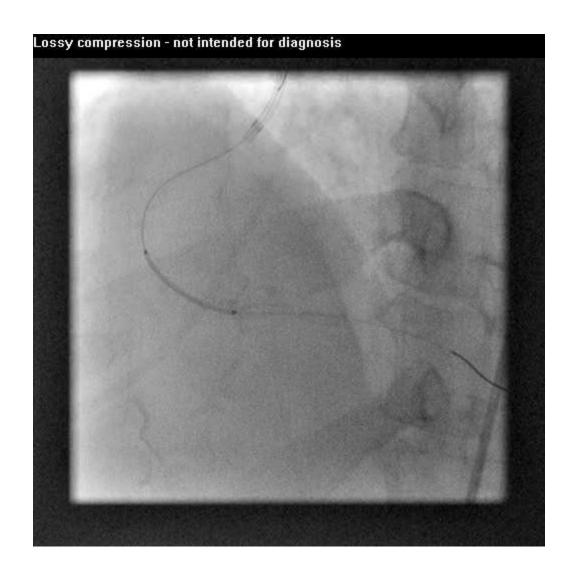






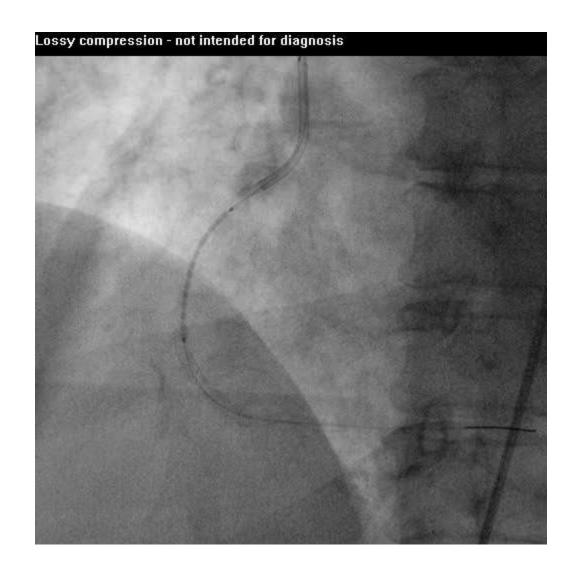






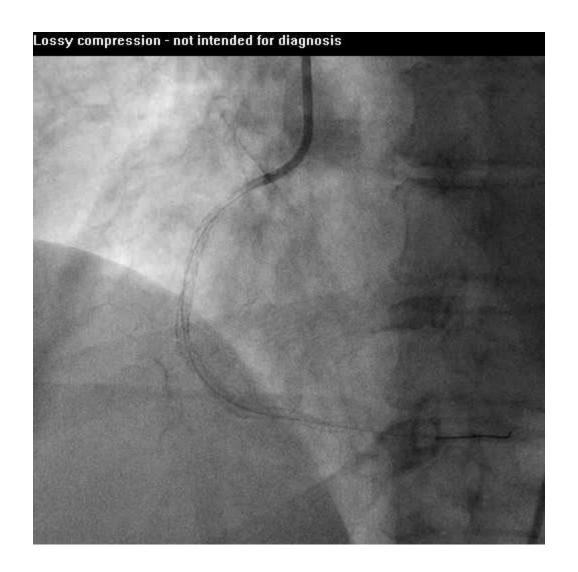












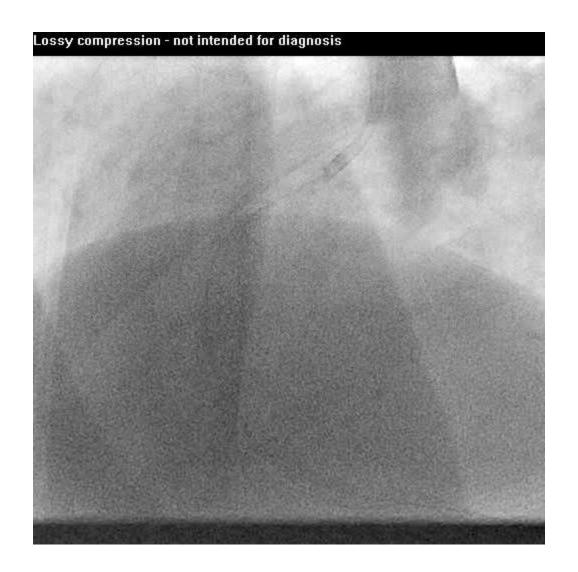






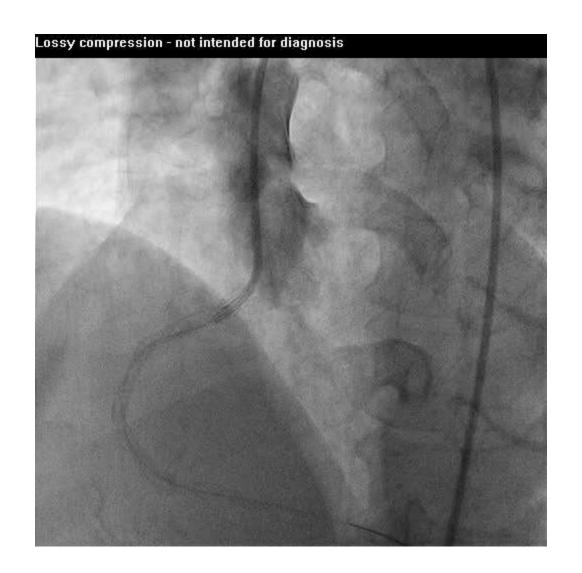






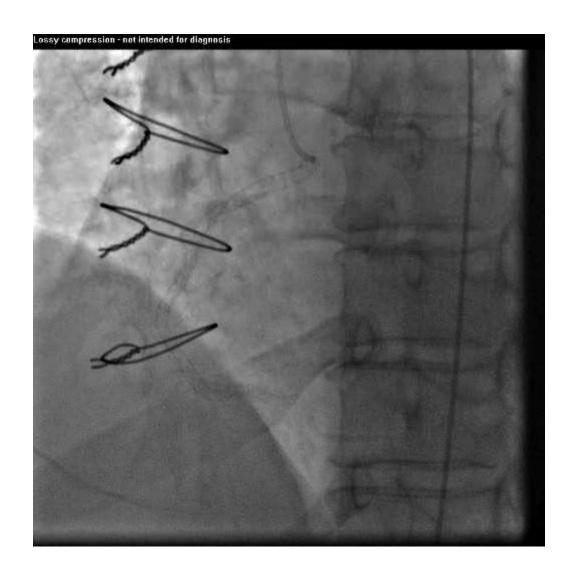
















### Lessons

- Stay calm.
- Do not lose distal wire position.
- Do not forget about the guide.
- Do not inject without direct visualization of guide arterial pressure waveform.
- Cardiac Surgery back-up still nice to have!



