

STEP 1
Identify patients at risk for acute AoD

Consider acute AoD in all patients presenting with: (T1)

- Chest, back, or abdominal pain
- Syncope
- Symptoms consistent with perfusion deficit (i.e. CNS, mesenteric, myocardial, or limb ischemia)

Boxes with accompanying text are labeled and numbered with the **T** symbol.

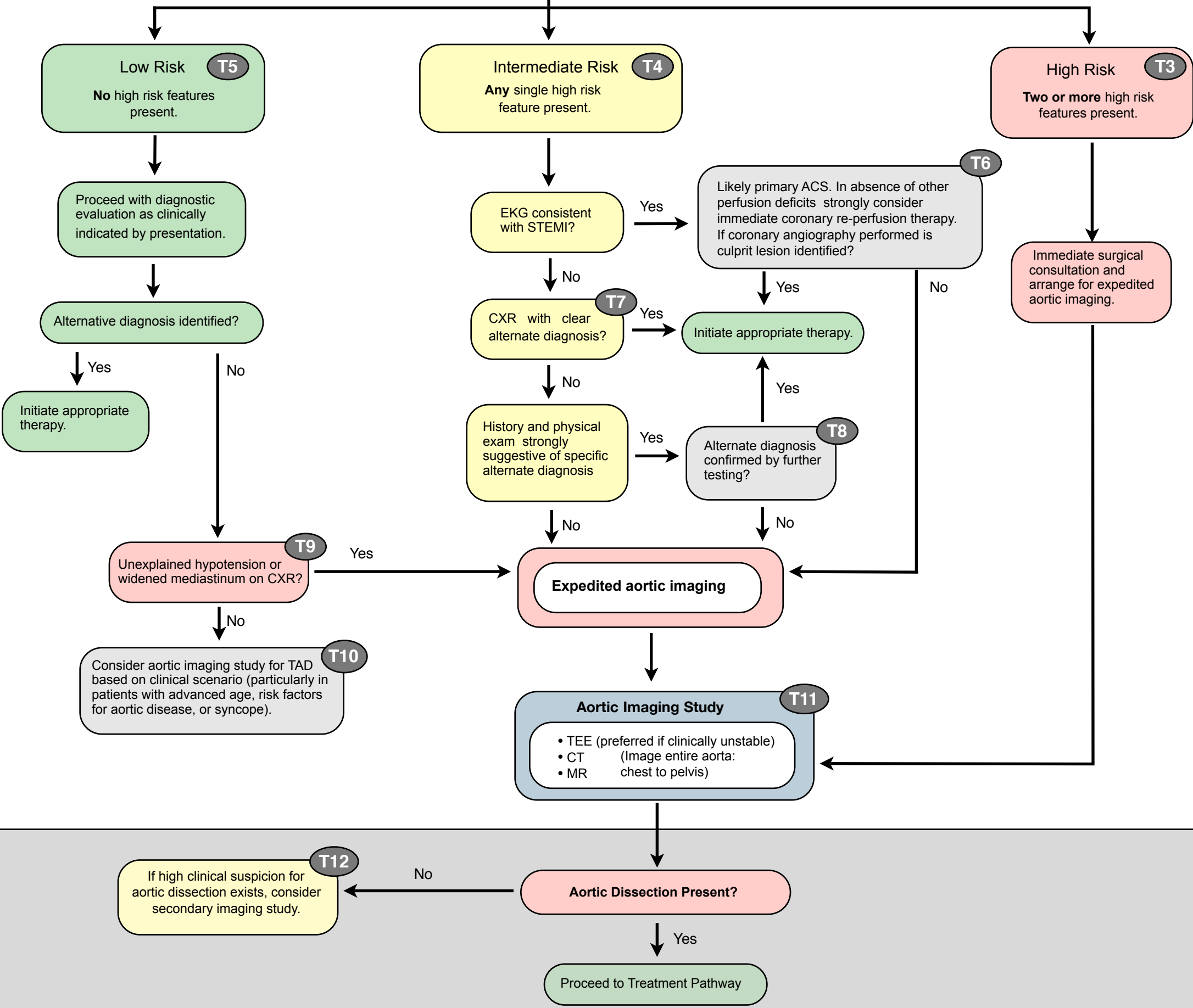
STEP 2
Bedside risk assessment

Focused bedside pre-test risk assessment for acute AoD. (T2)

<p>High Risk Conditions (1)</p> <ul style="list-style-type: none"> • Marfan Syndrome • Connective tissue disease • Family history aortic disease • Known aortic valve disease • Recent aortic manipulation • Known thoracic aortic aneurysm 	+	<p>High Risk Pain Features (2)</p> <p>Chest, back, or abdominal pain described as the following:</p> <ul style="list-style-type: none"> • Abrupt in onset/ severe in intensity <p>and</p> <ul style="list-style-type: none"> • Ripping/ tearing/ sharp or stabbing quality 	+	<p>High Risk Exam Features (3)</p> <ul style="list-style-type: none"> • Evidence of perfusion deficit • Pulse deficit • Systolic BP differential • Focal neurologic deficit (in conjunction with pain) • Murmur of aortic insufficiency (new or not known to be old and in conjunction with pain) • Hypotension or shock state
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Determine pre-test risk by combination of risk conditions, history, and exam.

STEP 3
Risk based diagnostic evaluation



STEP 4
Acute AoD identified or excluded