

P.E.T.M.A.C. DEADLY concerning stories for causes of chest pain

PULMONARY EMBOLISM

History & Physical
Dyspnea, Fatigue, Tachycardia, Unilateral leg swelling

Risk Factors
PERC to rule out, Wells Criteria for PE to stratify risk

ESOPHAGEAL RUPTURE

Vomiting/retching followed by sudden onset chest pain (Boerhaave syndrome)

Recent endoscopy or surgical procedure, Internal erosion (severe GERD or caustic ingestion)

TENSION PNEUMOTHORAX

Sudden onset chest pain and worsening respiratory distress

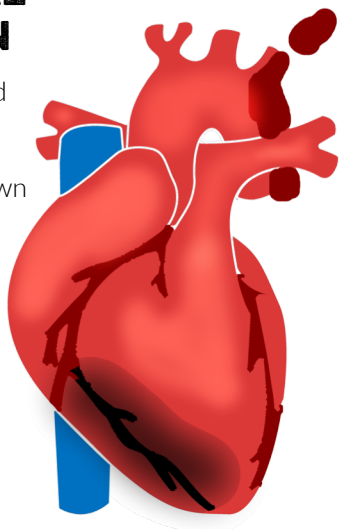
Penetrating trauma
Bullae and blebs
Connective tissue disease

MYOCARDIAL INFARCTION

History
Exertional, centralized or left-sided, chest pressure or tightness, radiating up neck/down arms

Associated Symptoms
Diaphoresis, Shortness of breath, Nausea, Palpitations

Risk Factors
Smoking, Diabetes, HTN, Family Hx of early CVD, Cocaine



AORTIC DISSECTION

Sudden onset, ripping or tearing, chest or back pain

Syncope, New neurological deficit, Abdominal symptoms

Male: Female 3:1, HTN, Previous aneurysm, Connective tissue disorder

CARDIAC TAMPONADE

Penetrating trauma, Gradual onset chest pain and respiratory distress

Beck's triad
distant heart sounds
distended neck veins
decrease in blood pressure

Malignancy, Renal failure, Recent myocardial infarction

STABLE ANGINA

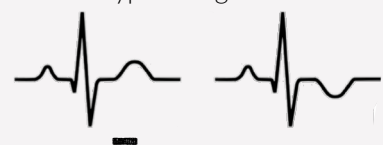
Stable Angina
Demand ischemia
Previous history of angina



Trop EKG
Normal

VS

Unstable Angina
Supply ischemia
New or atypical angina



Normal, T wave inversion, ST Depressions

ACUTE CORONARY SYNDROME

NSTEMI

Subendocardial Infarct
Partial vessel occlusion



+

STEMI

Transmural Infarct
Complete vessel occlusion



+

Hyper-acute T waves, ST elevation
Reciprocal changes