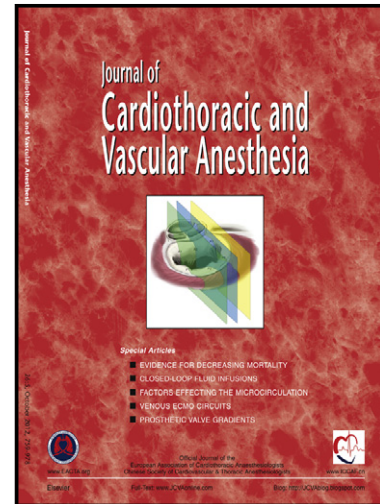


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Acute Severe Chest Pain in the Presence of known Coronary Artery Disease: New Myocardial Ischemia, Aortic Dissection, or some other Evolving Cardiovascular Catastrophe?

Brent T. Boettcher DO, Shaun M. Irish MD, Mohamed Algahim MD, Chris K. Rokkas MD, Christopher J. Plambeck MD, Jutta Novalija MD PhD, Paul S. Pagel MD PhD



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Acute severe chest pain in the presence of known coronary artery disease: new myocardial ischemia, aortic dissection, or some other evolving cardiovascular catastrophe?

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Running Title: Giant sinus of Valsalva aneurysm

Key Words: Sinus of Valsalva; aortic aneurysm; hemopericardium; aortic insufficiency; acute chest pain, differential diagnosis; aortic dissection; myocardial ischemia; coronary artery disease; coronary stent

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A 72 year-old, 99 kg, 170 cm man was transferred to the authors' institution from a community hospital for evaluation of new severe stabbing chest pain radiating to his back. The patient's pain began suddenly at his home and was accompanied by dizziness, palpitations, diaphoresis, dyspnea, and nausea. He acknowledged a history of coronary artery disease and stated that he previously underwent coronary stent implantation more than a decade before the current admission. His past medical history was notable for chronic atrial fibrillation, hypertension, hyperlipidemia, tobacco use, and an abdominal aortic aneurysm for which he was

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