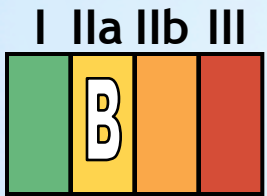


* Inrayascular Ultrasound

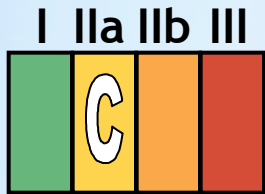


IVUS is reasonable for the assessment of angiographically indeterminate left main CAD.

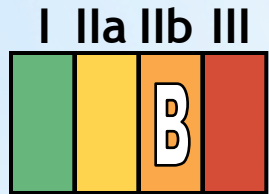


IVUS and coronary angiography are reasonable 4 to 6 weeks and 1 year after transplantation to exclude donor CAD, to detect rapidly progressive cardiac allograft vasculopathy, and to provide prognostic information.

* Intravascular Ultrasound (cont.)

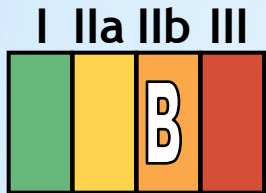


IVUS is reasonable to determine the mechanism of stent restenosis.



IVUS may be reasonable for the assessment of non-left main coronary arteries with angiographically intermediate coronary stenoses (50% to 70% diameter stenosis).

* Intravascular Ultrasound (cont.)



IVUS may be considered for guidance of coronary stent implantation, particularly in cases of left main coronary artery stenting.



IVUS may be reasonable to determine the mechanism of stent thrombosis.



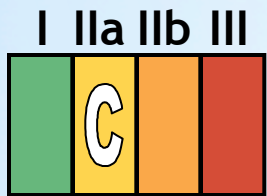
No Benefit

IVUS for routine lesion assessment **is not recommended** when revascularization with PCI or CABG is not being contemplated.

Procedural Considerations

Adjunctive Therapeutic Devices

* Coronary Atherectomy



Rotational atherectomy is reasonable for fibrotic or heavily calcified lesions that might not be crossed by a balloon catheter or adequately dilated before stent implantation.

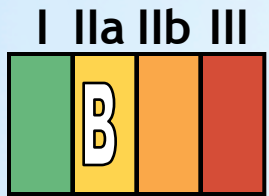


Rotational atherectomy should **not be performed** routinely for de novo or in-stent restenosis.

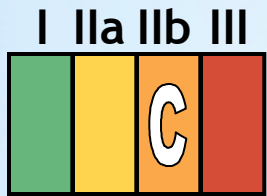
No Benefit

*Thrombectomy

Aspiration thrombectomy is reasonable for patients undergoing primary PCI.



* Laser Angioplasty phtots...



Laser angioplasty might be considered for fibrotic or moderately calcified lesions that cannot be crossed or dilated with conventional balloon angioplasty.



Laser angioplasty should not be used routinely during PCI.

No Benefit

* Cutting Balloon Angioplasty



Cutting balloon angioplasty might be considered to avoid slippage-induced coronary artery trauma during PCI for in-stent restenosis or for ostial lesions in side branches.



Cutting balloon angioplasty **should not be performed** routinely during PCI.

No Benefit

* Embolic Protection Devices



Embolic protection devices should be used during saphenous vein graft PCI when technically feasible.