Since January 2020 Elsevier has created a COVID-19 resource centre with free information in English and Mandarin on the novel coronavirus COVID-19. The COVID-19 resource centre is hosted on Elsevier Connect, the company's public news and information website.

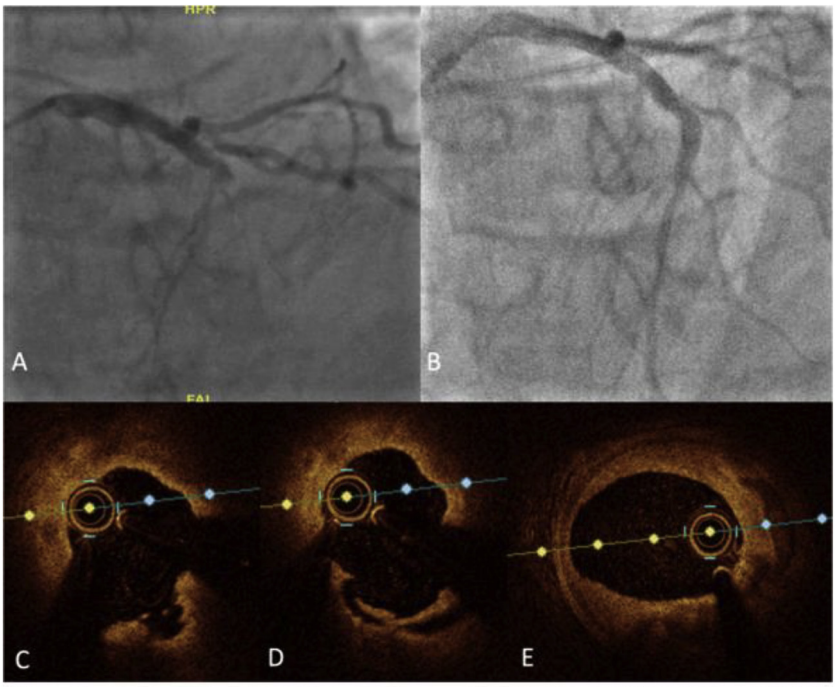

Figure 1 – Coronary angiography showing occluded LAD pre- (A) and post-PCI (B); OCT showing proximal ulcer crater (C), extensive dissection of non-obstructive plaque (D) and stable non-obstructive plaque distal to occlusion (E)

demonstrated a 4×3.5 mm artery, diffuse non-obstructive plaques, moderate residual thrombus, and an ulcer crater proximal to the site of occlusion leading into extensive plaque dissection. A 3.5×22 mm DES was deployed with good result (see Figure 1).

Conclusion: Mechanical trauma to the anterior chest may disrupt pre-existing atherosclerotic plaques especially in the LAD to cause coronary occlusion. Large arteries with bulky plaques may be particularly vulnerable.

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Cardiac Telehealth Pre-Admission Clinic at a Tertiary Hospital – Impact on Patient Journey During the COVID-19 Pandemic

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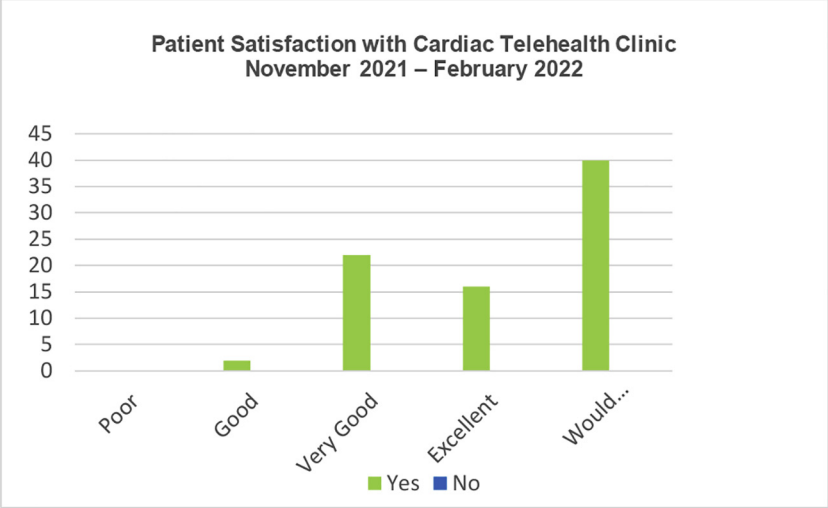
Background: CSANZ guidelines recommend implementing Telehealth clinic appointments [1] to reduce impact of delayed medical treatments during the COVID-19 pandemic [2]. Patient preparation and follow-up can be performed without patient-staff contact [3] which minimises viral transmission risk for both parties [4].

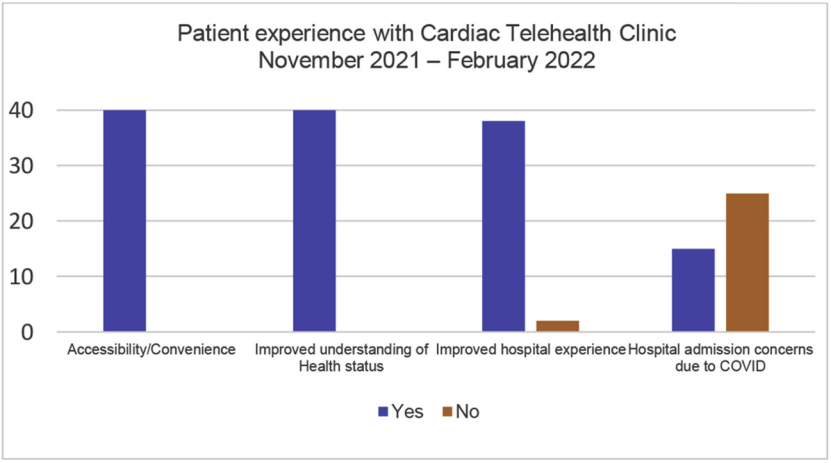
Aim: To explore cardiac patient journey experiences with Telehealth clinic as an alternative health service delivery model during the COVID-19 pandemic.

Methods: Liverpool Hospital Cardiac Interventional Unit (CIU) instituted telehealth clinics pre-elective outpatient procedures. Telehealth nurse interviews were conducted with consecutive post-coronary angiography patients who had pre-procedure Telehealth clinic from November 2021 to February 2022. Patients' experiences via a survey were collected.

Results: 40 patients were enrolled. All patients reported Telehealth as easily accessible and convenient. All patients understood their health status and pre/post-procedure care instructions. 8/40 (20%) patients had non-English speaking backgrounds and required interpreters. 2/40 (5%) patients had unanswered questions after their Telehealth clinic. Telehealth was associated with positive hospital experience in 38/40 (95%) patients. 15/40 (38%) patients reported concerns regarding hospital admission due to COVID-19. Most patients 18/40 (45%) expressed no p Reference but 12/40 (30%) preferred Telehealth clinic whilst 10/40 (25%) preferred in-person appointments. Patient experience was highly rated in all patients as either 'Good' (2/40), 'Very Good' (22/40) or 'Excellent'' (16/40). All would recommend Telehealth for future appointments.

Conclusion: At our facility during the COVID-19 pandemic, Telehealth clinics conducted pre-cardiac procedures can assist in delivering excellent patient satisfaction and journey experiences [5]. Telehealth clinic is generally positive and accepted by patients.





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