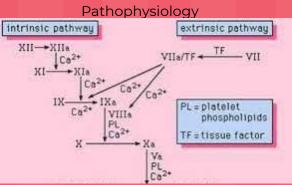
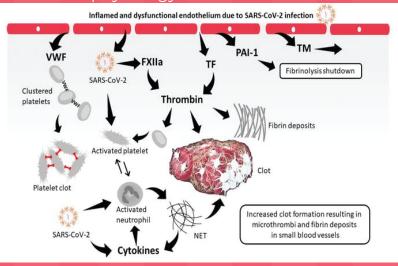
Thrombotic Cardiac Events in post covid-19 patients

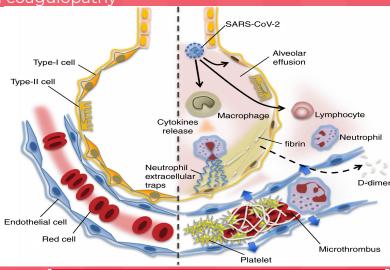


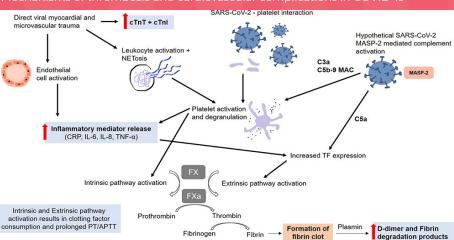
Case Study

34 year male presented with chest pain on 13/6/21 had history of Covid pneumonia in March 2021 and received a 2nd dose of vaccination one day before an event. Found anterior wall MI F/B cardiac arrest after 35 minutes of CPR and shock revived and intubated ventilated and taken for PAMI to LAD then shifted to ICU with cardiogenic shock and severe metabolic acidosis was on multiple Inotropic support. In ICU after ROSC TTM has given. Found elevated level of D-DIMER(4230) high NTproBNP and positive value of cardiac markers.then patient develop AKI and treated accordingly after reaching Normothermia patient started myoclonic jerks neuromonitaring and neuro imaging done suggestive of normal imaging. Patient weaned and extubated. Discharged after symptomatic treatment and monitoring.

Pathophysiology of COVID-19 and associated coagulopathy





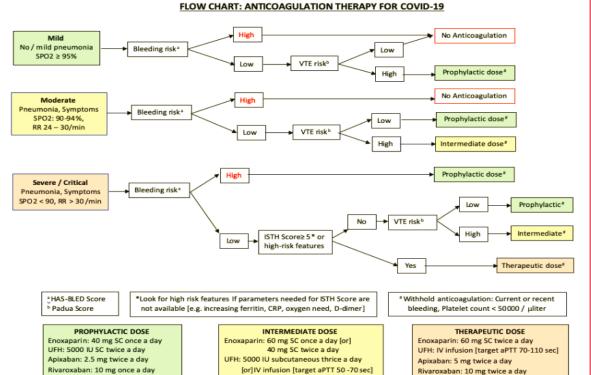


Rivaroxaban: 10 mg once a day

Table, Current Guideline Recommendations for Venous **Thromboembolism Prevention in Hospitalized Patients** With Coronavirus Disease 2019

Patient/setting	Recommendation	
	American College of Chest Physicians	International Society on Thrombosis and Hemostasis
Critically ill	Prophylactic-dose LMWH	Prophylactic-dose LMWH; half-therapeutic-dose LMWH can be considered if patient is high risk
Non-critically ill	Prophylactic-dose LMWH or fondaparinux	Prophylactic-dose LMWH
After discharge	Extended prophylaxis not recommended	LMWH/DOAC for up to 30 d can be considered if high thrombosis risk and low bleeding risk
Nonhospitalized	Routine prophylaxis not recommended	Routine prophylaxis not recommended

Abbreviations: DOAC, direct oral anticoagulant; LMWH, low-molecular-weight heparin.



[or] IV infusion [target aPTT 50 -70 sec]

Conclusion

Therapeutic and prophylactic dose of anticoagulant in covid-19 patients can be beneficial to prevent cardiac events

Anticoagulant taper with regular monitoring of d

Dr. Sarita Bhardwai