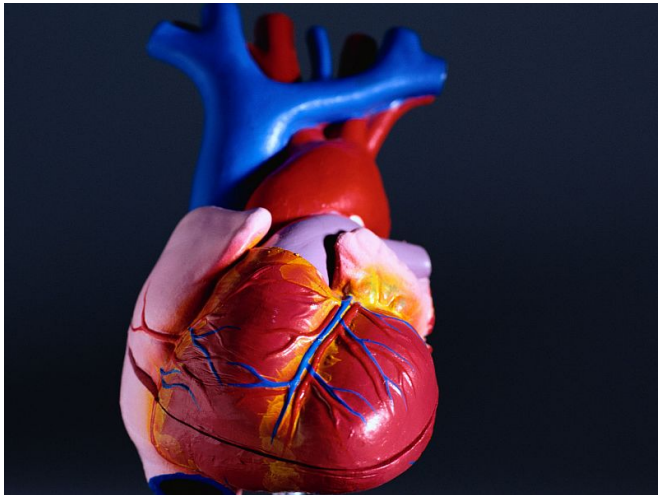


# Recs provided for transcatheter aortic valve replacement

6 January 2017



complications; and (4) recommendations for patient follow-up, including immediate post-procedure care and longer-term follow-up to ensure continuity of care.

"TAVR is one of the most rapidly expanding technologies in medical care today, and as our population ages, we will see increasing numbers of people with severe [aortic valve stenosis](#), so it is important to provide [guidance](#) on optimal use of this treatment," Otto said in a statement.

Several authors disclosed financial ties to the pharmaceutical industry.

**More information:** [Full Text \(subscription or payment may be required\)](#)

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(HealthDay)—In a clinical expert consensus report published online Jan. 4 in the *Journal of the American College of Cardiology*, a series of practice point-of-care checklists help provide guidance on the use of transcatheter aortic valve replacement (TAVR).

Noting that TAVR is a new technology for [patients](#) with severe aortic valvular stenosis, and is currently approved for high surgical risk or inoperable patients, Catherine M. Otto, M.D., from the University of Washington in Seattle, and colleagues offer guidance on its use.

The authors present point-of-care checklists and algorithms. These are provided in four specific areas: (1) preprocedure evaluation of patients being considered for TAVR, including selection criteria, discussion of shared decision making, and consideration of other risk assessments; (2) imaging modalities and measurements, including which modalities are required and when; (3) key issues in TAVR performance and management of

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