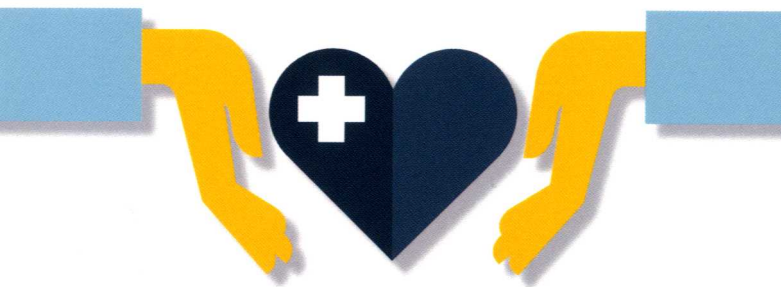


Atrial Fibrillation

A Step By Step Guide





*A STEP BY STEP
GUIDE*

1 Confirm AF with a good quality 12 lead ECG. V₁ & 2 are the best leads to spot 'p' waves

2 If unstable or breathless on mild exertion or rest consider admitting

3 Score AF Stroke Risk using CHA₂DS₂-VASc

4 Score Bleeding Risk using HAS-BLED



5 Use HAS-BLED score to manage bleeding risk factors, rather than to exclude people from anticoagulation

6 Offer anticoagulation depending on score at time of diagnosis, 'Don't wait to anticoagulate'

7 Offer choice of warfarin or NOAC

8 Ensure good INR control

9 Ensure NOAC compliance and renal clearance are adequate

10 Review all NOAC patients 6 monthly

TOP TIP:
Divide creatinine clearance by 10 = monthly frequency of monitoring of U+Es

Assessing Non-Valvular Atrial Fibrillation Related Stroke Risk

CHA ₂ DS ₂ -VASc	SCORE
Congestive heart failure	1
Hypertension	1
Age ≥ 75 years	2
Diabetes mellitus	1
Stroke/TIA/TE	2
Vascular disease (prior MI, PAD aortic plaque)	1
Aged 65 to 74 years	1
Sex category (i.e. female sex)	1
MAXIMUM SCORE	9



