

Repaired	Symptomatic
AAA	CAD PAD

CVA/TIA Ischemic, Embolic

DM ASA: HTN/Smoking: M ≥ 50 yrs, F ≥ 60 yrs, ACEI: ≥ 55 yrs or microalbuminuria

PHASE MEDICATIONS & CAUTIONS
INDEPENDENT of BP control or Statin Use

ASA

ASA	81mg daily
CAUTION/INFO	If ASA intolerant: Clopidogrel : CAD, Sx PAD Warfarin: Embolic CVA/TIA

ACEI

Lisinopril	10mg daily
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CAUTION/INFO Verify effective contraception in women of childbearing potential: Use Chlorthalidone or HCTZ.
Use ACEI with caution: eGFR <30, K >5.5
ARB may be inappropriate : Hx of Angioedema, renal failure or hyperkalemia on ACEI.

ACEI+Thiazide: HX ISCHEMIC & EMBOLIC CVA
HX INTRACRANIAL HEMORRHAGE

Lisinopril - HCTZ	10–12.5mg daily
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STATIN

• Clinical ASCVD³ Age < 75 + any LDL

Atorvastatin	40–80mg daily
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• Clinical ASCVD Age ≥ 75 + any LDL

• DM: Age ≥ 40 + LDL 70-189

Simvastatin OR	20-40mg daily
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Atorvastatin	10-20mg daily
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CAUTION/INFO Verify effective contraception in women of childbearing potential.

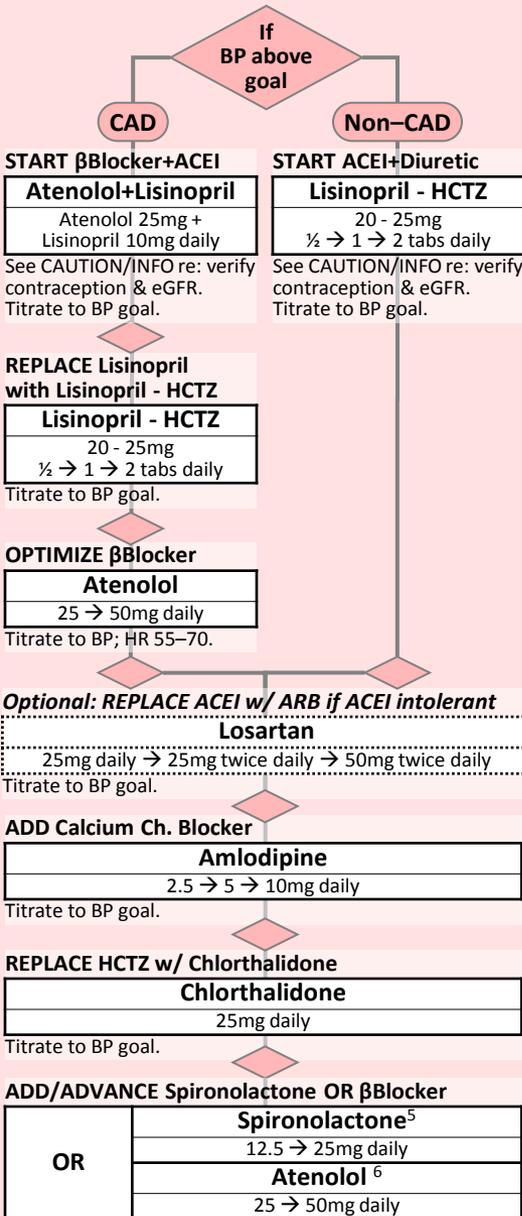
BETA BLOCKER – FOR CAD/Sx PAD/AAA

Atenolol	25mg daily
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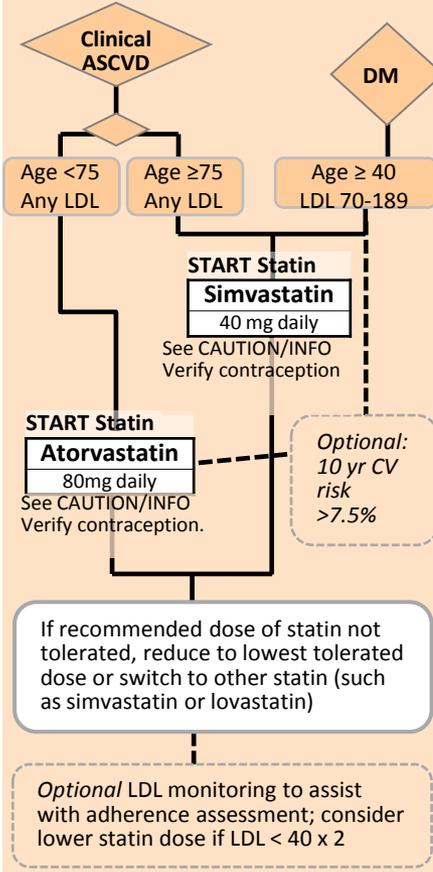
CAUTION/INFO Use with caution: HR <55, asthma, hypotension.
HF or LVEF <40%: Use 1) Carvedilol or 2) Bisoprolol.
eGFR <30: Use Metoprolol ER.

¹ BP algorithm applies to eGFR ≥ 30 and LVEF ≥ 40%.
² CKD: Microalbuminuria or [(age/2) + eGFR] < 85

BP Goals¹
≤ 139/89: < 60 yrs and/or DM, and/or CKD²:
≤ 149/89: ≥ 60 yrs, no DM, no CKD/microalb.



Statin Goals
Atorvastatin 40-80 mg:
• Clinical ASCVD³ Age < 75 + any LDL
Simva 20-40 mg or Atorva 10-20 mg:
• Clinical ASCVD Age ≥ 75 + any LDL
• DM: Age ≥ 40 + LDL 70-189

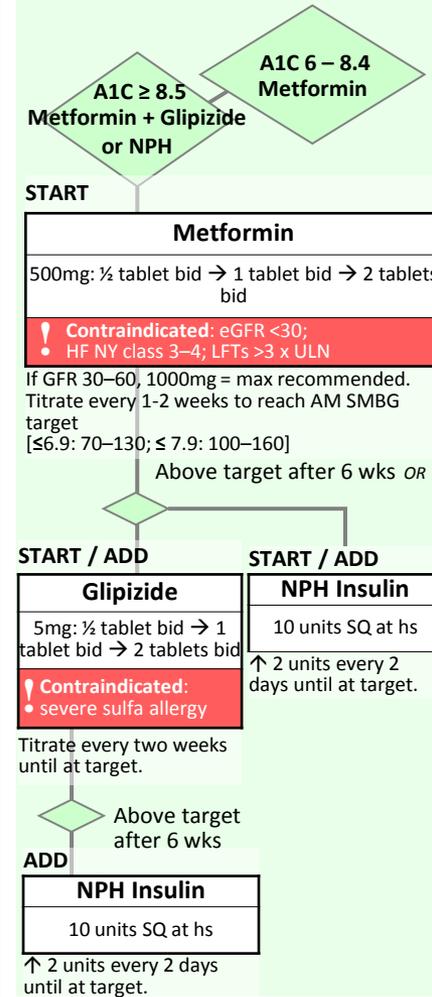


³Clinical ASCVD (atherosclerotic cardiovascular disease): CAD, TIA/CVA, Symptomatic PAD, Repaired AAA
⁴ Individualize A1c goal based on Risk of hypoglycemia, Duration of DM, Life expectancy, Comorbidities, Vascular complications, member resources, and support system.
⁵IF on thiazide AND eGFR ≥ 60 AND K < 4.5
⁶Titrate to BP; HR 55–70.

Adapted from KPNC CPG for: CAD, DM, Cholesterol, HTN, HF and Stroke

Complete guidelines can be found in the Clinical Library at <http://cl.kp.org>
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Design: Vince Rowell, Quality and Operations Support

A1c Goals Rev. 20.17 (04/14)
≤ 7.9%: > 65 yrs or clinical factors⁴
≤ 6.9%: < 65 yrs w/o clinical factors



BP	Preferred Dosage Forms	Max. Rec. Dose	Optimal Titration Interval	Baseline Labs	Titration	Lab Monitoring
ACE Inhibitor - Diuretic Lisinopril - HCTZ (Prinzide®)	Tab 20 - 25mg	40 - 50mg daily	2 weeks	K+ and SCr. within last 6 months (Na+ optional)	K+ and SCr. 1 week after initiation or dosage change (Na+ optional)	K+ and SCr. every 12 months
Thiazide Diuretics HCTZ (Hydrodiuril®, Esidrix®)	Tab 25mg	HCTZ 50mg daily	2 weeks	K+ and SCr. within last 6 months (Na+ optional)	K+ and SCr 1 week after initiation or dosage change (Na+ optional)	K+ and SCr. every 12 months
Chlorthalidone (Hygroton®)	Tab 25mg	25mg daily	2 weeks	K+ and SCr. within last 6 months (Na+ optional)	K+, SCr 1 week after initiation or dosage change (Na+ optional)	K+ and SCr. every 12 months
ACE Inhibitor Lisinopril (Prinivil®)	Tab 5, 10, 20mg	40mg daily	1 week	K+ and SCr. within last 6 months	K+ and SCr 1 week after initiation. K+ 2 weeks after dosage change	K+ and SCr. every 12 months
ARB Losartan (Cozaar®)	Tab 25, 50mg	100mg daily or 50mg twice daily	1 week	K+ and SCr. within last 6 months	K+ and SCr 1 week after initiation. K+ 2 weeks after dosage change	K+ and SCr. every 12 months
Calcium Channel Blocker Amlodipine (Norvasc®)	Tab 2.5, 5, 10mg	10mg daily	1 week	None	None	None
Potassium Sparing Diuretic Spironolactone (Aldactone®)	Tab 25mg	25mg daily	1 week	K+, SCr. within last month	K+ and SCr 1 week after initiation & 2 weeks after dosage change	K+ and SCr. every 12 months
β1 blockade Atenolol (Tenormin®)	Tab 25, 50, 100mg	100mg daily	1 week	None	Titrate to pulse 55-70	None
Metoprolol (Lopressor®)	Tab 25, 50, 100mg	100mg twice daily	1 week	None	Titrate to pulse 55-70	None
Metoprolol ER (Toprol®)	Tab 25, 50, 100mg	200mg daily	1 week (2 weeks for heart failure)	None	Titrate to pulse 55-70	None
Bisoprolol (Zebeta®)	Tab 5, 10mg	10mg daily	1 week (2 weeks for heart failure)	None	Titrate to pulse 55-70	None
Carvedilol (Coreg®)	Tab 3.125, 6.25, 12.5, 25mg	25mg twice daily	1 week (2 weeks for heart failure)	None	Titrate to pulse 55-70	None
DM 2	Preferred Dosage Forms	Max. Rec. Dose	Optimal Titration Interval	Baseline Labs	Titration	Lab Monitoring
Oral agents for DM 2 Metformin (Glucophage®)	Tab 500, 850, 1000mg	850mg 3xdaily or 1000mg twice daily	2 months	SCr. (CBC optional)	Do not use if eGFR<30. Not recommended in HF	SCr. every 12 months
Glipizide (Glucotrol®)	Tab 2.5, 5, 10mg	20mg twice daily	2 months	None	None	None
LDL	Preferred Dosage Forms	Max. Rec. Dose	Optimal Titration Interval	Baseline Labs	Titration	Lab Monitoring
Antilipemics Simvastatin (Zocor®)	Tab 40mg	40mg daily at bedtime	4 weeks	ALT, CK, SCr	None	SCr. every 12 months ALT if clinically indicated
Atorvastatin (Lipitor®)	Tab 40, 80mg	80mg daily	4 weeks	ALT, CK, SCr	None	SCr. every 12 months ALT if clinically indicated