

- Spontaneous coronary artery dissection is a rare life-threatening condition that may present as acute myocardial infarction.
- Selective revascularization of affected vessel is indicated in patients with on-going ischemia while symptom-free, stable patients demonstrate excellent prognosis with conservative management alone.
- Percutaneous coronary intervention (PCI) is challenging as conventional angiogram may fail to visualize intimal flap and identify true lumen, especially if it is severely narrowed.
- Also, hematoma filling the false lumen may simulate intra-coronary thrombus.
- Intravascular ultrasound (IVUS) during PCI establishes anatomic site of dissection and confirms stent placement in the true lumen; application of IVUS at index presentation also prevents catastrophic outcomes like false lumen stenting, and collapse of the true lumen.

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