<sup>3</sup>Consider (not in order of

<sup>4</sup>Clinical Coordinating Center

approved.

preference): ivabradine, nicorandil, perhexiline, trimetazidine, where

## LIPID LOWERING THERAPY HYPERTENSION THERAPY **ANGINA THERAPY** Goal: Systolic BP <130 mmHg Goal: LDLC <70mg/dL (1.8 mmol/L) Sublingual NTG and Atorvastatin 80 mg Start β-blocker and **β-blocker** Rosuvastatin 40 mg ACE inhibitor/ARB6 If needed to relieve angina If needed to control BP Not at LDL goal after 3 Not at LDL goal after 3 Add or substitute months, evolocumab months, evolocumab CCB1, LAN2, or available not available Increase ACE inhibitor or ARB ranolazine If needed to relieve angina If needed to control BP Add ezetimibe<sup>5</sup> Add evolocumab<sup>5</sup> Add or substitute Add CCB and/or drug class not diuretic Not at LDL goal after 3 months already prescribed<sup>3</sup> If BP not controlled If angina not controlled Contact CCC Risk Factor Contact CCC4 Risk Factor Contact CCC Risk Factor Management Team Management Team Management Team <sup>6</sup>ARB=angiotensin receptor <sup>1</sup>CCB=calcium channel blocker 5Where available blocker <sup>2</sup>LAN=long-acting nitrate