

DATE 

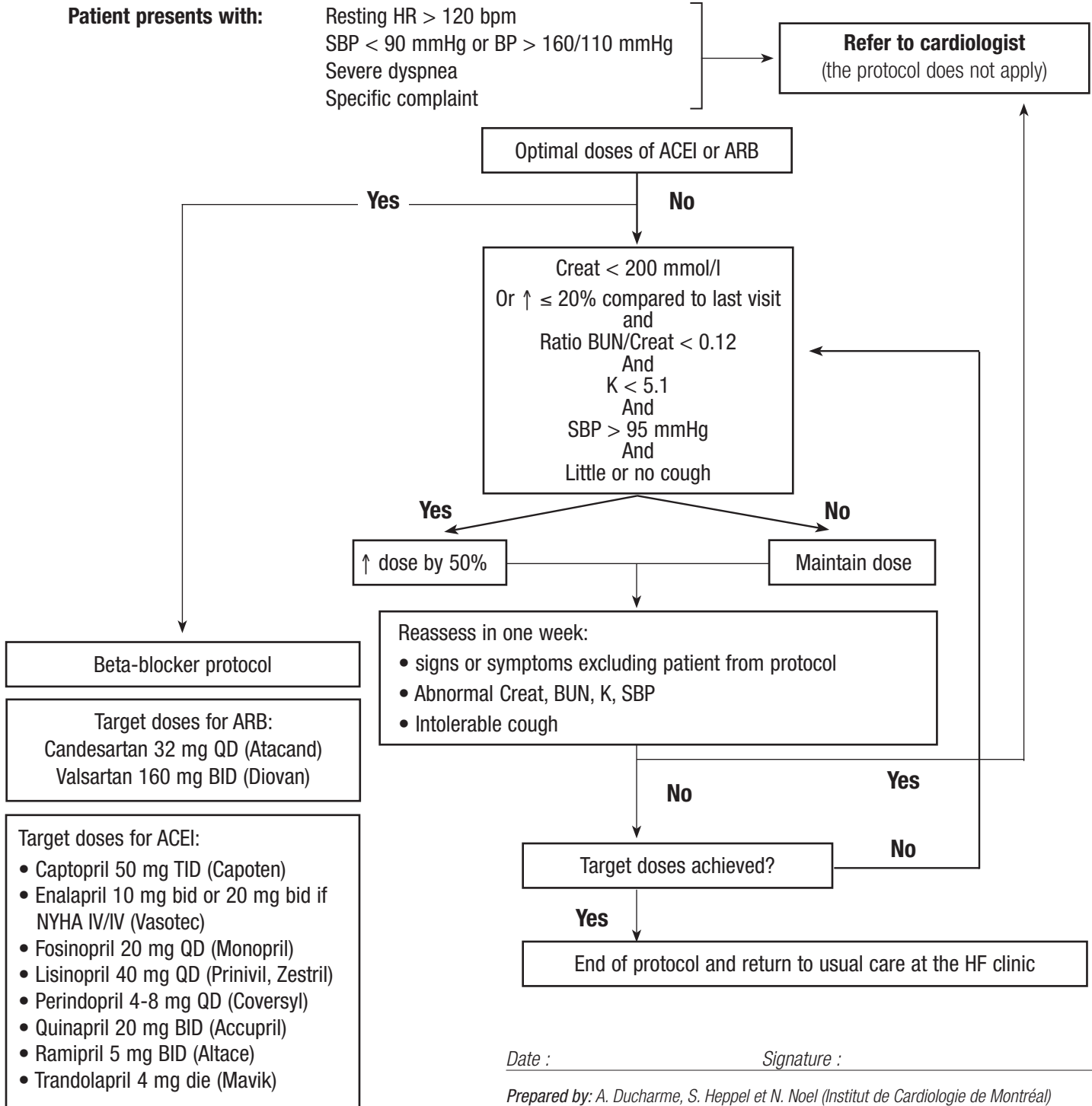
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Note that the following algorithm applies to ARB only when the patient is intolerant to ACEI (cough) or is post-MI (valsartan). If the patient has experienced angioedema while on ACEI, do not give ARB, except candesartan after medical reassessment.

**Patient presents with:**

- Resting HR > 120 bpm
- SBP < 90 mmHg or BP > 160/110 mmHg
- Severe dyspnea
- Specific complaint

**Refer to cardiologist**  
 (the protocol does not apply)



Beta-blocker protocol

Target doses for ARB:  
 Candesartan 32 mg QD (Atacand)  
 Valsartan 160 mg BID (Diovan)

Target doses for ACEI:

- Captopril 50 mg TID (Capoten)
- Enalapril 10 mg bid or 20 mg bid if NYHA IV/IV (Vasotec)
- Fosinopril 20 mg QD (Monopril)
- Lisinopril 40 mg QD (Prinivil, Zestril)
- Perindopril 4-8 mg QD (Coversyl)
- Quinapril 20 mg BID (Accupril)
- Ramipril 5 mg BID (Altace)
- Trandolapril 4 mg die (Mavik)

Date : \_\_\_\_\_ Signature : \_\_\_\_\_

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This algorithm for Beta-blocker optimization should only be applied when the patient is at dry weight, i.e. when there has been no weight increase of => 2kg/week in the last week.

