



- Flush thoroughly¹
- Coaxial guide engagement¹
- Ensure no damping¹
- Interrogate LAD unless there is a specific territory of interest²
- Advance wire sensor 2/3 distally in vessel³
- Administer GTN/NTG¹
- Flush/purge pre-Tmn_{rest} to clear any blood and contrast³
- Room temperature saline³
- Brisk 3 mL x 3 injections³
- Address outliers (± 0.15s) before proceeding^{4*}

*Repeat measurement of Tmn_{rest}

- Induce hyperemia⁵
- Confirm hyperemia*6
- Flush/purge pre-Tmn_{hyp} to clear any blood and contrast⁶
- Room temperature saline⁶
- Brisk 3 mL x 3 injections⁶
- Address outliers (± 0.15s) before proceeding^{4**}

*Decrease in pressure, patient symptoms, FFR drop **Repeat measurement

of Tmn_{rest}

- CFR < 2.5*4
- CFR grey zone 2.0-2.4*

*Evolving consensus

- IMR ≥25²
- Use IMRcorr if FFR ≤0.80⁷
- Diagnosis of CMD based on IMR ≥25 and CFR <2.5*2,4
- CFR grey zone 2.0-2.4*
- Refer to guidelines and consensus document^{2,4, 8-9}

*Evolving consensus

GTN (glyceryl trinitrate) | NTG (nitroglycerin) | LAD (left anterior descending) | FFR (fractional flow reserve) | IMRcorr (IMR corrected) | CMD (coronary microvascular dysfunction) | Tmn_{rest} (resting transit mean time) | Tmn_{hyn} (hyperemic transit mean time)

References:

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