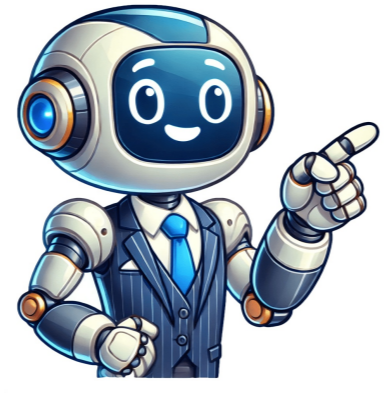


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2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APha/ASH/ASPC/NMA/PCNA Guideline for the Prevention, Detection, Evaluation, and Management of High Blood Pressure in Adults: Executive Summary: A Report of the American College of Cardiology/American Heart Association Task Force on Clinical Practice Guidelines. Whelton PK, Carey RM, Aronow WS, Casey DE Jr, Collins KJ, Dennison Himmelfarb C, DePalma SM, Gidding S, Jamerson KA, Jones DW, MacLaughlin EJ, Muntner P, Ovbagele B, Smith SC Jr, Spencer CC, Stafford RS, Taler SJ, Thomas RJ, Williams KA Sr, Williamson JD, Wright JT Jr, Whelton PK, et al. *J Am Coll Cardiol*. 2018 May 15;71(19):2199-2269. doi: 10.1016/j.jacc.2017.11.005. Epub 2017 Nov 13. *J Am Coll Cardiol*. 2018. PMID: 29146533 Review. No abstract available. Updated on: March 17, 2025 Please note: the ACC uses a January - December calendar, which is indicated in the estimated release dates below. The documents appear in order based on their estimated release date. Document Topic Estimated Release Date Clinical Practice Guidelines (ACC/AHA) High Blood Pressure 2025 Quarter 3 Acute Pulmonary Embolism 2025 Quarter 4 Adults With Congenital Heart Disease 2025 Quarter 4 Cholesterol 2026 Quarter 1 Cardiovascular Kidney Metabolic Syndrome 2026 Quarter 1 Performance Measures (ACC/AHA) Chronic Coronary Disease 2025 Quarter 2 Peripheral Artery Disease 2026 Quarter 1 Expert Consensus Decision Pathways Tricuspid Regurgitation 2025 Quarter 2 Optimizing Postpartum Care for Women With or At-Risk of CVD 2025 Quarter 3 Blood Pressure Monitoring and Management 2025 Quarter 4 Systems of Care Operator and Institutional Requirements for Tricuspid Regurgitation 2025 Quarter 4 Concise Clinical Guidance Pericarditis 2025 Quarter 2 Weight Loss Medications for Cardiovascular Benefit 2025 Quarter 2 Nutrition and Fetal Packaging Food Labeling as a Catalyst for CV Health 2025 Quarter 3 Diagnosis and Management of Cardiovascular Adverse Effects of Targeted Oncology Therapies 2025 Quarter 3 Navigating Pediatric Left to Right Shunt Lesions 2025 Quarter 3 Adult Immunizations for Cardiovascular Benefit 2025 Quarter 3 Scientific Statements Management of Obesity in Adults With Heart Failure 2025 Quarter 2 Inflammation and Cardiovascular Disease 2025 Quarter 3 Cardiovascular Care of the Tactical Athlete 2025 Quarter 4 Appropriate Use Criteria Coronary Revascularization 2025 Quarter 4 Aortic Stenosis (Update of 2017 AUC) 2026 Quarter TBD Competence and Training Statements Advanced Training Statement on Advanced Cardiovascular Imaging 2025 Quarter 4 Advanced Training Statement on Critical Care Cardiology 2026 Quarter 1 Advanced Training Statement on Clinical Cardiac Electrophysiology (Update of 2015) 2026 Quarter 1 Advanced Training Statement on Adults with Congenital Heart Disease 2026 Quarter 2 Filter List (Updated March 2024) The following documents were developed by other organizations and were reviewed and endorsed by the American College of Cardiology (ACC). Although there is agreement with the general concepts contained in these documents and confidence in the methodology used for development by the convening organizations, the ACC may not agree with every identified statement and/or specific wording. These documents were not published by the ACC and do not represent official ACC policy. ACC Partnership and Endorsement Policy American Diabetes Association Standards of Medical Care in Diabetes- 2023. Chapter 10: Cardiovascular Disease and Risk Management, American Diabetes Association, January 2023. American Diabetes Association Standards of Medical Care in Diabetes- 2022. Chapter 10: Cardiovascular Disease and Risk Management, American Diabetes Association, January 2022. American Diabetes Association Standards of Medical Care in Diabetes- 2021. Chapter 10: Cardiovascular Disease and Risk Management, American Diabetes Association, January 2021. 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American Heart Association, publish date: Nov 10, 2018 Go to JACC article Download PDF Since 1980, the American College of Cardiology (ACC) and American Heart Association (AHA) have translated scientific evidence into clinical practice guidelines with recommendations to improve cardiovascular health. These guidelines, which are based on systematic methods to evaluate and classify evidence, provide a foundation for the delivery of quality cardiovascular care. The ACC and AHA sponsor the development and publication of clinical practice guidelines without commercial support, and members volunteer their time to the writing and review efforts. Clinical practice guidelines provide recommendations applicable to patients with or at risk of developing cardiovascular disease (CVD). The focus is on medical practice in the United States, but these guidelines are relevant to patients throughout the world. Although guidelines may be used to inform regulatory or payer decisions, the intent is to improve quality of care and align with patients' interests. Guidelines are intended to define practices meeting the needs of patients in most, but not all, circumstances, and should not replace clinical judgment. Recommendations for guideline-directed management and therapy, which encompasses clinical evaluation, diagnostic testing, and both pharmacological and procedural treatments, are effective only when followed by both practitioners and patients. Adherence to recommendations can be enhanced by shared decision-making between clinicians and patients, with patient engagement in selecting interventions on the basis of individual values, preferences, and associated conditions and comorbidities. The ACC/AHA Task Force on Clinical Practice Guidelines strives to ensure that the guideline writing committee both contains requisite expertise and is representative of the broader medical community by selecting experts from a broad array of backgrounds, representing different geographic regions, sexes, races, ethnicities, intellectual perspectives/biases, and scopes of clinical practice, and by inviting organizations and professional societies with related interests and expertise to participate as partners or collaborators. The ACC and AHA have rigorous policies and methods to ensure that documents are developed without bias or improper influence. The complete policy on relationships with industry and other entities (RWI) can be found online. Beginning in 2017, numerous modifications to the guidelines have been and continue to be implemented to make guidelines shorter and enhance "user friendliness." Guidelines are written and presented in a modular knowledge chunk format, in which each chunk includes a table of recommendations, a brief synopsis, recommendation-specific supportive text and, when appropriate, flow diagrams or additional tables. Hyperlinked references are provided for each modular knowledge chunk to facilitate quick access and review. More structured guidelines-including word limits ("targets") and a web guideline supplement for useful but noncritical tables and figures-are 2 such changes. This Preamble is an abbreviated version, with the detailed version available online. The reader is encouraged to consult the full-text guideline for additional guidance and details, since the executive summary contains mainly the recommendations. Keywords: AHA Scientific Statements; Guidelines; biomarkers, coronary artery calcium score; cardiovascular disease; cholesterol, LDL-cholesterol; diabetes mellitus; drug therapy; ezetimibe; hydroxymethylglutaryl-CoA reductase inhibitors/statins; hypercholesterolemia; lipids; patient compliance; pharmacological; primary prevention; proprotein convertase subtilisin/kexin type 9 inhibitor (PCSK9) inhibitors; risk assessment; risk reduction; risk treatment discussion; risk treatment discussion, secondary prevention. The American College of Cardiology provides a framework of evidence-based clinical statements and guidelines developed by leaders in the field of cardiovascular medicine. Click the links below for more information, publish date: Nov 13, 2017 Go to JACC article Download PDF Create Free Account or Adoption of the 2013 American College of Cardiology/American Heart Association Cholesterol Management Guideline in Cardiology Practices Nationwide. 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