

DO NOT SEND THIS PERSON HOME  
UNTIL THE POSSIBILITY OF AORTIC  
DISSECTION IS RULED OUT.

# EMERGENCY ALERT CARD



## THE **MARFAN** FOUNDATION

22 Manhasset Ave., Port Washington, NY 11050

Important  
information  
for medical  
professionals  
available.

**Marfan.org**  
**800-8-MARFAN**

Marfan syndrome  Related disorder, specify:

Medications, Notes:

Phone:

Physician:

Phone:

Emergency Contact:

Name:

**This patient has Marfan syndrome or a related disorder, which places him/her at 250 times greater risk for aortic dissection than the general population.**

Symptoms of aortic dissection can be variable, relatively minor, and nonspecific. **Chest pain** is the most common symptom, but **pain can also occur in the back and/or abdomen**. The pain may be described as severe or vague, constant or intermittent, migratory, tearing, tightness, or fullness. Other signs and symptoms can include **cardiovascular instability, pulselessness, parasthesia, paralysis, syncope**, or a sense that “something is terribly wrong.”

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The most definitive tests for aortic dissection are:

**CT scan • Transesophageal echocardiogram • MRI**

Choose the one that is most readily available, and expertly performed and interpreted.

A normal X-ray does **NOT** rule out the possibility of aortic dissection.

**50% OF PATIENTS WITH UNDIAGNOSED AORTIC DISSECTIONS DIE WITHIN 48 HOURS.**

**Please do not discount aortic dissection until it has been definitively ruled out.**

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Individuals with Marfan syndrome and related disorders are at **increased risk for rapid progression and poor outcome** from acute ascending or descending aortic dissection. Specialized and aggressive medical and surgical practices that are tailored to this patient population may be needed. If diagnosed with AD, this patient **must be transferred to a tertiary care center** with the capability of definitive surgical management immediately upon stabilization for transport. This is the consensus opinion of the Professional Advisory Board of The Marfan Foundation, and is in keeping with evidence-based guidelines established by the American College of Cardiology Foundation and American Heart Association in collaboration with eight other professional organizations.