

C. A. A.

U. A. A.

L. A. E/M

H. A. Ca

R. A. A. A.

D. A. /P. D. A.

Introduction

The purpose of this study is to investigate the effect of the (1,1)-graph of a graph on the chromatic number of the graph. We will show that the chromatic number of the (1,1)-graph of a graph is at most the chromatic number of the graph plus one.



Tab 1.A **Capital**
R **a** **a** **L** **E**



Class IIb <i>Benefit $\geq$ Risk</i> <i>Additional studies with broad objectives needed; additional registry data would be helpful</i> Procedure/Treatment MAY BE CONSIDERED	Class III <i>Risk $\geq$ Benefit</i> <i>No additional studies needed</i> Procedure/Treatment should NOT be performed/administered SINCE IT IS NOT HELPFUL AND MAY BE HARMFUL
■ Recommendation's usefulness/efficacy less well established ■ Greater conflicting evidence from multiple randomized trials or meta-analyses	■ Recommendation that procedure or treatment is not useful/effective and may be harmful ■ Sufficient evidence from multiple randomized trials or meta-analyses
■ Recommendation's usefulness/efficacy less well established ■ Greater conflicting evidence from single randomized trial or nonrandomized studies	■ Recommendation that procedure or treatment is not useful/effective and may be harmful ■ Limited evidence from single randomized trial or nonrandomized studies
■ Recommendation's usefulness/efficacy less well established ■ Only diverging expert opinion, case studies, or standard-of-care	■ Recommendation that procedure or treatment is not useful/effective and may be harmful ■ Only expert opinion, case studies, or standard-of-care

*D. $\frac{1}{2}$ inch = 12.5 mm

1. A. mm B. L

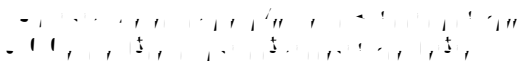
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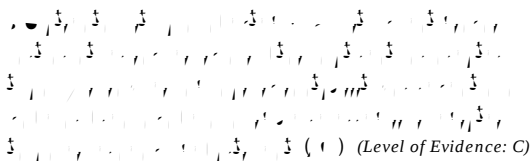
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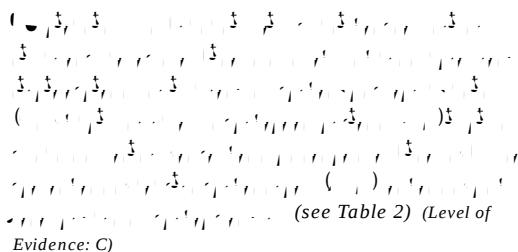


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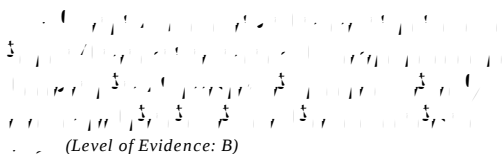
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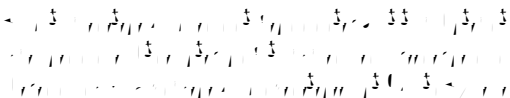
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(see Table 2) (Level of Evidence: C)



(Level of Evidence: B)



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 (Level of Evidence: B)

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 (see Table 4)
 (Level of Evidence B)
 (Level of Evidence: C)



Tab 3.5 **Preferred Strategy** **for the Treatment of Stable Ischemic Heart Disease**

Preferred Strategy	Patient Characteristics
Invasive	Recent MI or angina with objective evidence of significant coronary artery disease Elevated risk of death (see Table 3.4) No significant comorbidities or contraindications to revascularization Left ventricular dysfunction (LVEF $\leq 40\%$) High risk of death (see Table 3.4) High risk of death (see Table 3.4) PCI or CABG High risk of death (see Table 3.4) Recent MI or angina with objective evidence of significant coronary artery disease (LVEF $\leq 40\%$)
Conservative	Low risk of death (see Table 3.4) PCI or CABG

CABG = coronary artery bypass grafting; GRACE = Global Registry of Acute Coronary Events; HF = heart failure; LVEF = left ventricular ejection fraction; PCI = percutaneous coronary intervention; TIMI = Thrombolysis in Myocardial Infarction; TnI = troponin I; TnT = troponin T.

Tab 4. S-T R D a
N a a MI Pa W UA/NSTEMI*

[illegible]

*E m - m . m L A (N E M I) , m -
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C.A. a a A. a T a

see Figures 2, 3, 4 and 5 Table 5

F. 3. A. Pa. W. UA/NSTEMI

Marek b. a. L. a. C. a. S. a.

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F **4. Ma** **A** **D** **A**
Pa **W** **UA/NSTEMI**

J

ASA = ; CABG = ; CAD = ; GP = ;
IV = ; LD = ; PCI = ; pre angio = ;

История



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Tab 5.D **Tab A** **a a A a a**
T a Pa W UA/NSTEMI

			During
Drug*	Initial Medical Treatment	Patient Received Initial Medical Treatment	
Oral antiplatelet therapy			
A	162 325 m m	N	
C	LD 300 600 m MD 75 m	A LD 300 m m LD 300 m	
	LD 500 m MD 250 m	N	
Anticoagulants			
B	0.1 m 0.25 m	0.5 m 1.75 m	
D	120 l C 12 (m m 10,000 l)	I GP II /III : AC 200 FH N I GP II /III : AC 250 300 H m ; 300 350 H m FH	
E	LD 30 m I m MD=1 m C 12 ; 24 m 30 m m	L C 8 : L C 8 : 0.3 m I	
F	2.5 m C A 30 mL m	50 60. I FH, mm OA I 5 l	

Anticoagulants cont'd

LD 60. (m 4,000.) I GP II /III : .
I . ||

I GP II /III : 60 70 N , , m

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MD 6 J/ 1

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III. C o n t r a R a t a a

R a t a a R a t a a W
PCI a, CABG a, Pa a, W UA/NSTEMI

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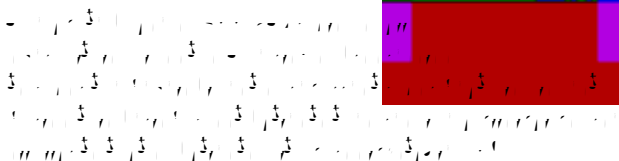


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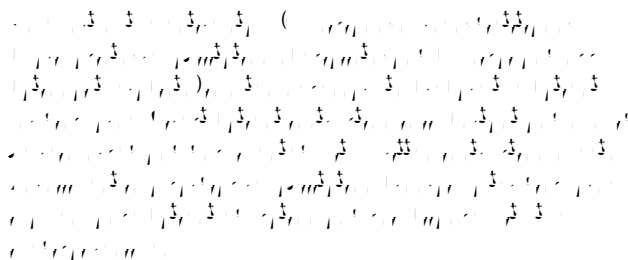
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IV. H a D a a
P -H a D a Ca



A. M a R

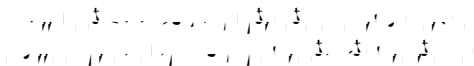


Radiation Protection

Call



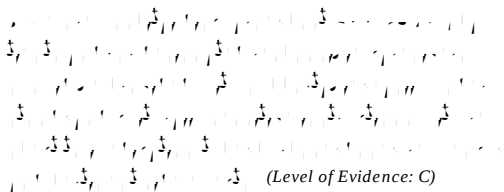
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B.L. -T. M. a T. a. a. S. a. P.

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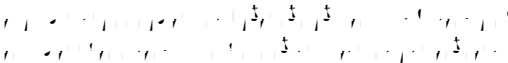
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Ca. IIa

C a. I (- , † , ‡ , § , ¶ , ¨ , ° , ± , × , ÷ , √ , ∞ , ≈ , ≅ , ≤ , ≥ , < , >)
 (Level of Evidence: C)

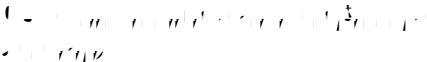
4. Ca $\rightarrow$ Ca²⁺ B₂O₃

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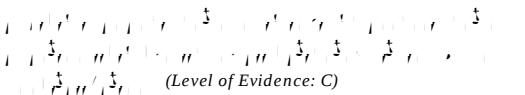


 (Level of Evidence: B)

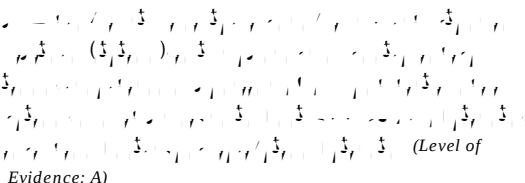
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 (Level of Evidence: C)



 (Level of Evidence: A)



 (Level of Evidence: A).



 (Level of Evidence: B)

1. The first step in the process is to identify the problem. This involves understanding the nature of the problem and the scope of the investigation. The next step is to gather evidence. This can be done through a variety of methods, including interviews, observations, and document review. Once the evidence has been gathered, it is important to analyze it. This involves looking for patterns and connections between the different pieces of evidence. Finally, the results of the investigation should be reported. This can be done in a variety of ways, including a written report, a presentation, or a video.

(Level of Evidence: C)

Ca. Ila

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(Level of Evidence: A)

2. The second step in the process is to identify the problem. This involves understanding the nature of the problem and the scope of the investigation. The next step is to gather evidence. This can be done through a variety of methods, including interviews, observations, and document review. Once the evidence has been gathered, it is important to analyze it. This involves looking for patterns and connections between the different pieces of evidence. Finally, the results of the investigation should be reported. This can be done in a variety of ways, including a written report, a presentation, or a video.

(Level of Evidence: B)

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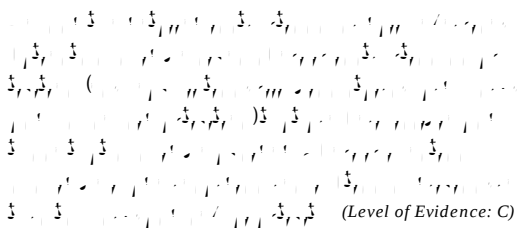
(...) (Level of Evidence: B)

(...) (Level of Evidence: B)

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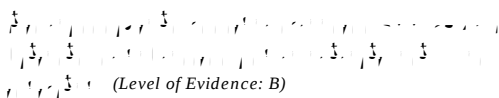
Fl. a

Ca. I



Fl. D

Ca. IIa



(Level of Evidence: A)

