

## Pre-Conference Workshops

To further support your learning, the following pre-conference workshops are offered at an additional fee. The workshops are available to all practitioners, including those who are unable to attend the Heart & Stroke Clinical Update 2017.

Workshop details will be updated as they become available.

**THURSDAY DECEMBER 7, 2017**

**8:00–5:00**      **NEW - Pediatric Emergency Assessment, Recognition, and Stabilization (PEARS®) Provider Course (includes BLS Renewal)**  
*Preparing you for pediatric emergencies, when every minute counts.*

Presented by: Heart & Stroke

Fee: \$325 (includes course materials, lunch and refreshments)

Course Instructors: The Heart & Stroke PEARs® Provider Course will be delivered by our outstanding team of instructors from Toronto's Sick Kids Hospital

The Heart & Stroke PEARs® Provider Course is the lifesaving solution for healthcare, and allied healthcare professionals who may encounter pediatric emergencies or who infrequently see critically ill or injured infants and children.

This program will prepare healthcare providers caring for pediatric patients to assess, recognize, and participate in the initial management of respiratory and/or cardiovascular emergencies and cardiopulmonary arrest. Students will learn how to provide appropriate lifesaving interventions within the initial minutes of response until the advanced life support provider arrives.

### COURSE DESIGN

The Heart & Stroke PEARs® Provider Course is designed to give students the opportunity to acquire, practice, and demonstrate proficiency in the assessment and management of critically ill pediatric patients.

The primary educational methodology used in the course is that of simulation, whether for skill acquisition, complex medical decision-making, or teamwork. Other modalities used are video demonstration and group discussion.

Students will have the opportunity to learn the following:

#### Skills:

- Performing child and infant cardiopulmonary resuscitation (CPR)
- Using oxygen delivery and airway management equipment
- Using shock management equipment and a method for giving rapid fluid boluses

Pediatric assessment: A systematic approach

Medical management:

- 4 types of acute respiratory problems
- 2 types of acute circulatory problems
- 2 types of cardiac arrest

Leadership: Communication and other important elements of team dynamics as they relate to resuscitation

Students are required to be tested for competency in child and infant basic life support (BLS).

Course completion card expiration date:

The Heart & Stroke PEARS® Provider Course completion cards has an expiration date of two (2) years from the date of completion.

The Heart & Stroke BLS Provider Course completion card has an expiration date of one (1) year from the date of completion.

PEARS® Provider Course Prerequisites:

Heart & Stroke Basic Life Support (BLS) Course Completion Card. Please note, the PEARS® Pre-conference course will include the Heart & Stroke BLS Renewal Course.

Included in Course Fee:

- Heart & Stroke BLS e-provider manual
  - Heart & Stroke PEARS® provider manual
  - BLS e-completion card (upon successful completion of BLS Renewal)
- PEARS® e-completion card (upon successful completion of PEARS® course)

For More Information:

Contact Sandra Zambon, [Sandra.zambon@heartandstroke.ca](mailto:Sandra.zambon@heartandstroke.ca)

### **8:00–12:15 Hypertension Management Train-The-Trainer Workshop**

Presented by: Canadian Cardiovascular Harmonized Guidelines Endeavour (C-CHANGE)

Fee: \$65 (includes breakfast and light refreshments)

This Group Learning program meets the certification criteria of The College of Family Physicians of Canada and has been certified by the Northern Ontario School of Medicine, Continuing Education and Professional Development Office for up to 4.0 Mainpro+ credits.

This event is an Accredited Group Learning Activity (Section 1) as defined by the Maintenance of Certification program of The Royal College of Physicians and Surgeons of Canada, approved by the Continuing Education and Professional Development Office at the Northern Ontario School of Medicine for up to 4.0 hours.

Speakers and Panel Members:

**Sheldon Tobe** MD, MScCH (HPTE), FRCPC, FACP, FASH

Hypertension and Nephrology

HSF/NOSM Chair in Aboriginal and Rural Health Research

Professor in Medicine, University of Toronto and Northern Ontario School of Medicine

**Rahul Jain** MD, CCFP, MScCH (HPTE)

Family Physician and Hospitalist  
Sunnybrook Health Sciences Centre  
Assistant Professor, University of Toronto, Department of Family and Community Medicine  
**Thuy Pham** RN(EC), MN, MScCH, CDE  
Nurse Practitioner  
Sunnybrook Health Sciences Centre  
**Marta Malkinska** BScPhm, PharmD (c)  
Clinical Pharmacist  
Sunnybrook Health Sciences Centre  
**Diane Hua-Stewart**, MPH  
Program Manager  
C-CHANGE Initiative, CPD  
Sunnybrook Health Sciences Centre

#### Session Description:

It is anticipated that after the session participants will be able to apply the C-CHANGE harmonized CVD guidelines in their practice and use the educational resources/tools to educate their colleagues and when counseling patients diagnosed with hypertension and other co-morbidities.

A presentation of the latest CHEP Recommendations and educational resources/tools will be followed by a discussion of different case studies with participants.

#### Learning Objectives:

At the conclusion of this workshop, participants will be able to:

- Educate other healthcare professionals on how to use the C-CHANGE guidelines and educational resources.
- Apply the C-CHANGE guidelines and educational resources in their practice for improved patient care.
- Educate their patients on how to control and manage their cardiovascular risk

#### **9:00–12:00 Practice-Based Small Group Workshops #1** **[Module 1a] Post Acute Coronary Syndrome Care** **[Module 1b] Advanced Heart Failure - A Palliative Approach to Care**

Presented by: The Foundation for Medical Practice Education in collaboration with McMaster University

Fee: \$250 (includes breakfast and light refreshments)

Course Instructor;

Risa Bordman, MD, CCFP-PC, FCFP

Associate Professor, Department of Family and Community Medicine, University of Toronto

#### **8.0 MAINPRO+© credits/session**

To qualify for the MAINPRO+© credits participants will be required to complete a self-reflective post-session document for each module topic

#### *[Module 1a] Post Acute Coronary Syndrome Care*

##### Session Description:

Acute coronary syndromes (including myocardial infarction and unstable angina) are associated with significant morbidity and mortality. Although fewer Canadians are dying from a first heart attack, those who survive face a challenging recovery and are at risk for subsequent events that impact quality of life. Individuals are required to make significant lifestyle changes, take a

compendium of medications, and cope with the physical and psychological impact of surviving an event. Optimal management aims to improve patient outcomes while avoiding complications and hospital readmission. Efficient discharge planning and timely communication promote safe transition from hospital to community. Ongoing follow up includes re-evaluating the patient's cardiovascular and bleeding risk, medication management, referral to cardiac rehabilitation, guidance for return to activities, and specialist consultation when needed.

Objectives:

- Review and implement key interventions (pharmacologic and lifestyle) to prevent the progression of coronary artery disease and subsequent ischemic events, following discharge from hospital.
- Reflect on current management of patients with post acute coronary syndrome, identifying important features of follow up, and adopting processes to assist in patient understanding and decision making.
- Recognize when further interventions and specialist referral may be required.

*[Module 1b] Advanced Heart Failure – A Palliative Approach to Care*

Session Description:

The incidence of heart failure (HF) is rising more rapidly than all other cardiovascular diseases. While survival after diagnosis has improved, HF remains an incurable disease in most cases. Patients who progress to end-stage disease suffer from high rates of dyspnea, pain, depression and other symptoms. Maximal therapy can help to relieve these symptoms and improve quality of life. A chaotic disease trajectory, however, makes prognostication difficult, and complicates goals of care conversations and access to palliative care.

Objectives:

- Understand how the trajectory of advanced HF challenges the traditional model of providing palliative care.
- Engage patients living with advanced HF in discussions about advance care planning and goals of care.
- Recognize the symptom burden and caregiver needs of this population.
- Effectively palliate symptoms of advanced heart failure.

**9:00–12:00 Practice-Based Small Group Workshops #2**  
**[Module 2a] Oral Anticoagulants**  
**[Module 2b] Vitamin and Mineral Supplementation & Primary Disease Prevention**

Presented by: The Foundation for Medical Practice Education in collaboration with McMaster University

Fee: \$250 (includes breakfast and light refreshments)

Course Instructor:

Course Instructor: Mary Manno, BScN, MD, CCFP

### **8.0 MAINPRO+© credits/session**

To qualify for the MAINPRO+© credits participants will be required to complete a self-reflective post-session document for each module topic

### *[Module 2a] Oral Anticoagulants*

#### Session Description:

Large randomized controlled trials have demonstrated the efficacy and safety of newer oral anticoagulants, known as directly acting oral anticoagulants (DOACs), for stroke prevention in atrial fibrillation, and the prevention and treatment of venous thromboembolism. As alternatives to vitamin K antagonist therapy (warfarin), they provide important options to manage patients, including those who may have difficulty accessing regular coagulation monitoring. However, as these agents are encountered more frequently in practice, concerns have surfaced related to ongoing monitoring, bleeding management, access and cost/benefit coverage for patients. As a result, the clinician's role is to select the most appropriate anticoagulant therapy, assess the benefits and potential bleeding risks, consider when to switch agents, and provide the follow-up required in the longer term, for individual patients.

#### Objectives:

- Safely and effectively prescribe and monitor DOAC oral anticoagulant therapy for a variety of conditions, weighing the risks and benefits in all age groups, including the elderly.
- Assist patients to make decisions about anticoagulation options, based on current available evidence.
- Confidently manage perioperative DOAC therapy and initiate treatment for those who develop active bleeding when needed.

### *[Module 2b] Vitamin and Mineral Supplementation: Primary Disease Prevention*

#### Session Description:

Dietary supplements are used by more than half of the adult North American population. It is assumed for the majority, that eating a variety of nutrient-rich foods provides the necessary vitamins and minerals required for daily life. However, many healthy individuals take dietary supplements in an effort to maintain overall health, prevent disease, as anti-aging treatments or simply to compensate for eating poorly. With so many nutritional supplements available and claims made about their health benefits, it can be challenging to help patients decide whether a vitamin or mineral supplement is safe and beneficial for them.

#### Objectives:

- Understand the evidence for nutrient supplementation in the primary prevention of chronic disease.
- Consider the safety profile for various vitamins and minerals, including possible drug interactions.
- Communicate and tailor the risks and benefits of vitamin and mineral supplementation for individual patients, and where to access reliable sources of information to help make an informed decision.

### **13:00-17:15 C-CHANGE PEARLS Clinical Practice Guidelines (PCCG) Workshop**

Presented by: Canadian Cardiovascular Harmonized National Guidelines Endeavour (C-CHANGE)

Case Module 1: "Donald" Cardiovascular Management of Patients with Chronic Kidney Disease

Case Module 2: "Mrs. J.D." Management of Patients with Hypertension and Diabetes

Case Module 3: "Miriam" Blood Pressure Measurement – Diagnosis and Follow Up

Fee: \$65 (For both modules. Fee includes light refreshments)

This Group Learning program has been certified by the College of Family Physicians of Canada for up to **9 Mainpro+ credits**.

Participants are required to complete self-reflective pre and post-session exercises to receive their study credits.

Course Instructors:

**Sheldon Tobe** MD, MScCH (HPTE), FRCPC, FACP, FASH

Hypertension and Nephrology

HSF/NOSM Chair in Aboriginal and Rural Health Research

Professor in Medicine, University of Toronto and Northern Ontario School of Medicine

**Rahul Jain** MD, CCFP, MScCH (HPTE)

Family Physician and Hospitalist

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**Thuy Pham** RN(EC), MN, MScCH, CDE

Nurse Practitioner

Sunnybrook Health Sciences Centre

**Marta Malkinska** BScPhm, PharmD (c)

Clinical Pharmacist

Sunnybrook Health Sciences Centre

Session Description:

The purpose of the PEARLS program is to assist health care providers to update their clinical practice to be current with the latest C-CHANGE clinical practice guidelines.

It is anticipated that after the session participants will be able to take away 'practice pearls' and implement the C-CHANGE cardiovascular harmonized guidelines in their practice to optimize screening, diagnosis and management of patients with multiple morbidities. Participants will engage in interactive small group discussions using case studies led by facilitators and a Q&A with a panel of experts.

Module 1 "Donald" Cardiovascular Management of Patients with Chronic Kidney Disease.

Upon completion of this case study, participants should be able to:

1. Plan to assess and screen patients' blood pressure at all appropriate visits
2. Discuss modifiable cardiovascular risk factors with patients.
3. Discuss blood pressure targets and need for anticoagulation/anti-platelet therapy in people who have just suffered a stroke.

Module 2 "Mrs. J.D." Management of Patients with Hypertension and Diabetes

Upon completion of this case study, participants should be able to:

1. Plan the investigation of patients with hypertension and diabetes including evaluation for nephropathy
2. Assess the risk associated with diabetes in patients with hypertension including the impact of diabetic nephropathy
3. Demonstrate knowledge of the blood pressure target in patients with hypertension living with diabetes

### Module 3: “Miriam” Blood Pressure Measurement – Diagnosis and Follow Up

Upon completion of this case study, participants should be able to:

1. To describe the new Hypertension Canada recommendations and algorithm for the diagnosis of hypertension
2. To outline the rationale for and the methods for using automated office blood pressure measurements.
3. Define White Coat Hypertension, Masked Hypertension, and Masked UnControlled Hypertension (MUCH)
4. To describe tools for helping learners acquire and teach the knowledge and skills for blood pressure measurement.

### **13:00–16:00 Practice-Based Small Group Workshops #3** **[Module 3a] Oral Anticoagulants** **[Module 3b] Dyslipidemia: Controversies in Primary Prevention**

Presented by: The Foundation for Medical Practice Education in collaboration with McMaster University

Fee: \$250 (includes light refreshments)

Course Instructor:

Susan Goldstein, MD, CCFP, FCFP, NCMP:

Assistant Professor, Department of Family and Community Medicine, University of Toronto

### **8.0 MAINPRO+© credits/session**

To qualify for the MAINPRO+© credits participants will be required to complete a self-reflective post-session document for each module topic

#### *[Module 3a] Oral Anticoagulants*

Session Description:

Large randomized controlled trials have demonstrated the efficacy and safety of newer oral anticoagulants, known as Directly Acting Oral Anticoagulants (DOACs), for stroke prevention in atrial fibrillation, and the prevention and treatment of venous thromboembolism. As alternatives to vitamin K antagonist therapy (warfarin), they provide important options to manage patients, including those who may have difficulty accessing regular coagulation monitoring. However, as these agents are encountered more frequently in practice, concerns have surfaced related to ongoing monitoring, bleeding management, access and cost/benefit coverage for patients. As a result, the clinician’s role is to select the most appropriate anticoagulant therapy, assess the benefits and potential bleeding risks, consider when to switch agents, and provide the follow-up required in the longer term, for individual patients.

Objectives:

- Safely and effectively prescribe and monitor DOAC oral anticoagulant therapy for a variety of conditions, weighing the risks and benefits in all age groups, including the elderly.
- Assist patients to make decisions about anticoagulation options, based on current available evidence.
- Confidently manage perioperative anticoagulant therapy and initiate treatment for those who develop active bleeding when needed.

*[Module 3b] Dyslipidemia: Controversies in Primary Prevention*

Session Description:

Dyslipidemia is a common and significant cardiovascular risk factor. Recent guidelines recommend treating a larger portion of the population at risk. For primary prevention, controversies remain about how best to estimate cardiovascular risk and manage the significant proportion of the population at low and intermediate risk. For patients at highest risk (who will benefit most), the challenge is to help them remain engaged in both lifestyle interventions and statin therapy.

Objectives:

- Determine which patients are most appropriate to screen for primary prevention.
- Treat patients using appropriate lifestyle modification and/or pharmacologic management, based on individualized patient cardiovascular risk.
- Persevere with statin therapy and aggressively manage side effects, relative to a patient's level of cardiovascular risk.

Practice-Based Small Group Workshops #4

**13:00–16:00 Practice-Based Small Group Workshops #4**

**[Module 3a] Bariatric Surgery**

**[Module 3b] Dyslipidemia: Controversies in Primary Prevention**

Presented by: The Foundation for Medical Practice Education in collaboration with McMaster University

Fee: \$250 (includes light refreshments)

Course Instructor:

Deanna Telner, MD, MEd, CCFP, FCFP

Assistant Professor, Department of Family and Community Medicine, University of Toronto

8.0 MAINPRO+© credits/session

To qualify for the MAINPRO+© credits participants will be required to complete a self-reflective post-session document for each module topic

**[Module 4a] Bariatric Surgery**

Session description:

Obesity rates have soared over the past two decades. Bariatric surgery is the most effective strategy to achieve persistent weight loss and reduce obesity related comorbidities and mortality. Primary care clinicians play a key role in identifying good candidates for bariatric surgery and providing ongoing care and counselling after surgery.

Objectives:

- Identify patients who are – and who are not – candidates for bariatric surgery.
- Counsel suitable patients about the nature of procedures, benefits and general risks.
- Screen and appropriately refer patients for bariatric surgery.
- Provide ongoing monitoring of relevant medication and nutritional parameters following bariatric surgery.
- Recognize common complications arising from bariatric surgery and refer appropriately.

**[Module 4b] Dyslipidemia: Controversies in Primary Prevention**

Session description:

Dyslipidemia is a common and significant cardiovascular risk factor. Recent guidelines recommend treating a larger portion of the population at risk. For primary prevention, controversies remain about how best to estimate cardiovascular risk and manage the significant proportion of the population at low and intermediate risk. For patients at highest risk (who will benefit most), the challenge is to help them remain engaged in both lifestyle interventions and statin therapy.

Objectives:

- Determine which patients are most appropriate to screen for primary prevention.
- Treat patients using appropriate lifestyle modification and/or pharmacologic management, based on individualized patient cardiovascular risk.
- Persevere with statin therapy and aggressively manage side effects, relative to a patient's level of cardiovascular risk.

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Resuscitation workshop tbd – please email [clinicalupdate@heartandstroke.ca](mailto:clinicalupdate@heartandstroke.ca) if you would like to be informed when this information is posted.

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