Course Faculty

Director

Shaun Flynn,
Director, Cardiology Practice Based Program
Executive Director
New York State Council of Health-system Pharmacists
Albany, NY

Program Chair

Cynthia Sanoski PharmD, BCPS, FCCP
Program Director, Cardiology Practice Based Program
Chair and Associate Professor
Jefferson School of Pharmacy
Thomas Jefferson University
Philadelphia, PA

Faculty

Steve Dunn PharmD
University of Virginia School of Medicine
Charlottesville, VA

Jacqueline Lacey PharmD, BCPS
Assistant Professor
Jefferson School of Pharmacy
Thomas Jefferson University
Philadelphia, PA

Nicholas Leon, PharmD, BCPS
Assistant Professor
Jefferson School of Pharmacy
Thomas Jefferson University
Philadelphia, PA

Jo Ellen Rodgers, PharmD, BCPS, FCCP
Associate Professor
Esthelman School of Pharmacy
University of NC, Chapel Hill, NC

Registration

To register for this program and to find more information, please visit www.nyschp.org. The fee for this program will be $525 for NYSCHP members, $395 for students enrolled in a college of pharmacy and $675 for nonmembers. A $50 late fee will be addititionally charged as of March 23, 2015

Cancellations received 30 days prior to each program may request a 90% refund. Any cancellation within 30 days will be charged an additional $50 for the home-study material. Paid registrants who fail to attend the on site conference will receive the 10 hour home-study statement of credit provided the registrant successfully scores 70% or higher on the home-study test.

The right to cancel or change locations of the seminar due to insufficient registration is reserved by NYSCHP; registrants will be notified and receive a full refund for cancellation.

Home Study material will be sent to registrants including a pre-program survey. Home study exam answer sheets may be emailed to jbleyl@nyschp.org or faxed to NYSCHP at 518-456-9319 no later than April 9, 2015.

Hotel Accommodations For Room Booking you may visit http://www.thesagamore.com/ and submit code" nyschp2015" or call 866-385-6221. Room block to open Early 2015.

Special Needs: If any participant of the “Cardiology Practice Based Program” given by NYSCHP is in need of accommodations, please do not hesitate to submit written requests to Shaun Flynn at sflynn@nyschp.org at least two weeks prior to the activity.

Statement of Need

Providing services in the ambulatory care setting has been an important area of growth for the practice of pharmacy, especially in the field of Cardiology. The impact of pharmacists in various clinical settings is well documented and may include benefits such as improved therapeutic outcomes, increased patient satisfaction, and cost savings to the health care system. Specifically, the incorporation of a clinical pharmacist into a multidisciplinary cardiology team of physicians and nurses can provide benefits such as improved management of supportive care, enhanced education of patients receiving complicated treatment.

Conflict of Interest Statement

The “Conflict of Interest Disclosure Policy” of New York State Council of Health-system Pharmacists requires that faculty participating in any CE activity disclose to the audience any relationships with a pharmaceutical or equipment company. Any presenter who has disclosed relationships may create a conflict of interest with regard to their contribution to the activity and will not be permitted to present. NYSCHP also requires that faculty participating in any CE activity disclose to the audience when discussing any unlabeled or investigational use of any commercial product, or device, not yet approved for use in the United States.

Program Subject to Change

New York State Council of Health-system Pharmacists
Cardiology Practice Based Program
22.5 contact hours

April 23-24, 2015
The Sagamore Resort
Bolton Landing, NY 11369

NYSCHP
210 Washington Ave Extension
Albany, NY 12203
518-456-8819
Course Outline

Intended Audience: Pharmacists

Part 1 – Home Study Training – Knowledge Based
10 Credits or 1.0 CEUs  UAN#:0134-0000-15-005-H01-P

Acute Decompensated Heart Failure
Describe the pathophysiology, epidemiology and etiology of acute decompensated heart failure (ADHF) and identify the prognostic factors that can be used to stratify patient with ADHF by risk for unfavorable outcomes.
Recommend a strategy to manage patients with ADHF experiencing refractoriness to intravenous diuretic therapy.
Differentiate the role of various therapies for the management of ADHF including the use of vasodilators and inotropes.

Chronic Heart Failure
Describe the pathophysiology, epidemiology, and etiology of chronic heart failure (CHF). Distinguish current approaches to the routine management of chronic HF including the use of diuretics, angiotensin converting enzyme (ACE) inhibitors / angiotensin receptor blockers, and beta blockers.
Differentiate the role of adjunct therapies for the management of chronic HF including the use of digoxin, aldosterone antagonists, and combination of hydralazine/isosorbide dinitrate.

Atrial Fibrillation
Discuss the mechanism of action, clinical indications, and side effect profiles of the class I, II, III, and IV antiarrhythmic drugs.
Describe the pathophysiology, epidemiology, and etiology of atrial fibrillation (AF) and discuss the various methods for stratifying a patient’s risk for developing stroke in the presence of AF.
Explain the role of rate-control vs. rhythm-control treatment strategies in the management of AF

Acute Coronary Syndromes
Describe the pathophysiology, epidemiology, and etiology of acute coronary syndromes (ACS).
Identify the general pharmacotherapeutic approach to a hospitalized patient with an ACS.
Identify the critical pharmacotherapies for the secondary prevention of ACS.

Dyslipidemia
Describe the pathophysiologic process of developing atherosclerosis.
Identify patient-specific risks factors for developing cardiovascular disease according to the most recent guidelines developed by the American College of Cardiology/American Heart Association.
Differentiate the pharmacologic and pharmacokinetic properties of the various lipid lowering agents (i.e. HMG CoA reductase inhibitors (“statins”), fibrin acid derivatives, niacin, ezetimibe, bile acid sequestrants, and fish oil).

Hypertension
Determine the appropriate target blood pressure goal for various patient populations.
Identify the antihypertensive agents that are recommended for patients with hypertension as per the JNC8 guidelines.
Discuss appropriate monitoring parameters (for both efficacy and toxicity) for antihypertensive therapy, including follow-up.

Part 2 – Live Training – Live Seminar Application Based
12.5 Credits or 1.25CEUs  UAN#: 0134-0000-15-006-L01-P

At the conclusion of the live seminar, participants should be able to:

Acute Coronary Syndromes
Given a patient case, design an appropriate treatment plan for a patient with non-ST-segment elevation (NSTE) or ST-segment elevation (STE) ACS.
Distinguish the efficacy and safety of different antithrombotic agents in the treatment of NSTE or STE ACS.

Discuss strategies that can be implemented on an inpatient basis within one’s own institution to reduce acute myocardial infarction readmissions.

Chronic Heart Failure
Given a patient case, justify therapy for the management of chronic HF based upon primary literature and the most recent HF guidelines.
Given a patient case, evaluate a HF regimen and make recommendations for alleviating/minimizing adverse effects, minimizing drug interactions and/or improving efficacy, as warranted.
Discuss strategies that can be implemented on an inpatient basis within one’s own institution to reduce HF readmissions.

Acute Decompensated Heart Failure
Given a patient case, justify therapy for the management of ADHF based upon primary literature and the most recent guidelines.
Given a patient case, recommend standard or adjunct therapies for the management of ADHF.
Given a patient case, modify standard or adjunct therapies for the management of ADHF as changes in the clinical scenario occur.

Atrial Fibrillation
Given a patient case, design an appropriate treatment plan for the management of patients with AF based upon primary literature and the most recent AF treatment guidelines.
Given a patient’s risk factor profile, justify selection of appropriate antithrombotic therapy in patients with AF.
Provide recommendations for managing adverse effects or drug interactions that may develop in patients with AF who are receiving various antiarrhythmic and/or antithrombotic therapies.

Dyslipidemia
Discuss recent primary literature regarding dyslipidemia therapies.
Given a patient case, design an appropriate treatment plan for a patient with dyslipidemia.
Given a patient case, evaluate a dyslipidemia regimen and make recommendations for alleviating/minimizing adverse effects, minimizing drug interactions and/or improving efficacy, as warranted.

Hypertension
Discuss recent primary literature regarding antihypertensive therapies.
Given a patient case, design an appropriate treatment plan for a patient with hypertension.
Given a patient case, evaluate an antihypertensive regimen and make recommendations for alleviating/minimizing adverse effects, minimizing drug interactions and/or improving efficacy, as warranted.

Pharmacists will receive a total of 22.5 Hours of continuing education credit (2.25CEUs) upon completion of this seminar; in its entirety. The New York State Council of Health-system Pharmacists is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

Practice Based Program 0134-0000-15-007-B01-P

CE Credit: All evaluations are processed online at www.cesally.com You will have forty-five (45) days from the date of the program to process your evaluations and obtain your statement of credit.