

YOU ARE INVITED TO JOIN US

for a contemporary and clinically relevant educational activity which has been specifically designed to address the most frequently encountered clinical challenges in the management of patients with Atrial Fibrillation and the related co-morbidities in the primary care setting. This activity was developed by leading Canadian Experts to provide clinicians with answers to frequently asked questions and key take-away messages that can be applied to real-world practice.

Join us for a group learning session

Date: April-01-2019

Location: location name 117 silver linden dr richmond hill ON

Program Start Time: 15:08 Program End Time: 16:08

Speaker(s): Dr. andrew lai Moderator: Dr. New Li

Dr. andrew lai

RSVP:

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Agenda & Learning Objectives

LEARNING OBJECTIVES: Clinical Conundrums IV - 2019 Update

After participating in this activity, I am now better able to:

- Select personalized treatment options for stroke prevention in atrial fibrillation using current Canadian Practice Guidelines supplemente with reassuring "Real World" experience
- 2. Assess and optimize bleeding risk of atrial fibrillation patients requiring long-term DOAC stroke prevention treatment.
- Recognize the current treatment gap in Canada and take steps at ensuring appropriate dosage selection and long-term compliance with oral anticoagulation among AF patients

LEARNING OBJECTIVES: Clinical Conundrums IV - 2019 Update & FAQs

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LEARNING OBJECTIVES: Case 1: Periprocedural Management of Direct Oral Anticoagulants

After participating in this activity, I am now better able to:

- 1. Assess and stratify bleeding risk in patients with AF undergoing different procedures to guide treatment
- 2. Explain the challenges in bleeding management and stopping/restarting DOACs for a procedure and be familiar with current recommendations
- 3. Implement best evidence and guidelines for pre, peri, and post procedure DOAC management

LEARNING OBJECTIVES: Case 10: Management of DVT: A Practical Guide for Primary Practice

After participating in this activity, I am now better able to:

- 1. Establish the pre-test probability for deep vein thrombosis (DVT) by history, physical exam and Wells Score tool
- 2. Select the appropriate diagnostic test(s); D-dimer, and ultrasound (US) in accordance with pre-test probability
- 3. Describe the difference between proximal and full leg ultrasound
- 4. Prescribe initial treatment based on the diagnostic test results for above and below knee (DVT); and select appropriate dose and duration of anticoagulation therapies

This Group Learning program has been reviewed by the College of Family Physicians of Canada and is awaiting final certification by the College's ON Chapter

