

Name:

EVOLVING ANTICOAGULATION IN PRIMARY CARE

QI&CPD/ACRRM no.: __

Con	tact email: Contact telephone:	
REI	NFORCING ACTIVITY	
Moc activ	nk you for attending the 2018 Thrombo 360 meeting <i>Evolving Anticoagulation in Primary Care</i> , Active Learning Jule (ALM). The RACGP/ACRRM criteria of an ALM require you to complete the predisposing and reinforcing vities in addition to participating on the day. Once all requirements have been met, you will be awarded Sategory 1 QI&CPD points or 30 PRPD points.	
	se complete and email or fax back this activity to info@elixir.net.au ; Fax: 02 8212-8900. We also advise you to the completed copy on file for potential future audit purposes.	
ACT	TVITY	
	aim of this reinforcing activity is to encourage you to reflect on your clinical practice in the context of the cation you have participated in.	
MA	NAGING PATIENTS WITH COAGULATION DISORDERS	
enco you	ng the 2–3 weeks following the meeting, can you recall a challenging NVAF or DVT/PE presentation that you buntered? If not, please consider a 'hypothetical patient' based on your clinical experience. Please reflect on what learnt at the meeting, and consider how this would impact on your management of patients with NVAF or DVT/P nswering the following questions:	
1.	What may make the decision-making or diagnosis of this case, or cases that you have seen recently, a challenge?	
2.	How could the management of your challenging patients be impacted as a result of attending this meeting?	
3.	Can you recall some specific techniques learnt or knowledge gained during the ALM that you did or would employ to assist you in managing such patients?	



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you	rase list the 4 most important learning outcomes you gained from the meeting that assisted /would assist In in managing challenging patients with NVAF or DVT/PE?
1	•
2	•
3	
4	•
	there anything else you learnt at the meeting that would impact in a general sense with your managemen patients with either NVAF or DVT/PE? For example, any other treatment approaches adopted?
	there anything else you learnt at the meeting that would impact in a general sense with your managemen patients with either NVAF or DVT/PE? For example, any other treatment approaches adopted?

PLEASE SCAN/EMAIL OR FAX BACK THIS FORM TO ELIXIR HEALTHCARE EDUCATION AT info@elixir.net.au; FAX: (02) 8212 8900

NVAF: Non-valvular atrial fibrillation; DVT: Deep vein thrombosis; PE: Pulmonary embolism.

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Attendees are responsible for obtaining approval to receive and/or disclose hospitality as required by their employer or professional association. In line with the Medicines Australia Code of Conduct, this educational meeting is only open to healthcare providers. Guests or family members cannot be accommodated.

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