CNEA

KEY CHOICE

2022 VIRTUAL TOUR

THE INSTITUTE OF CARDIOVASCULAR EXCELLENCE

Gain expertise, confidence, and recognition in your clinical practice.

CARDIAC ARRHYTHMIA MANAGEMENT & HEMODYNAMICS AND SHOCK: FOR EXCELLENCE IN PRACTICE

2 DAY CONFERENCE

Topics:

- ⇒ Physiological Basis of Arrhythmias
- ⇒ Clear Criteria for Bradyarrhythmias
- ⇒ Atrial tach, flutter, and fibrillation
- ⇒ AVNRT versus AVRT
- ⇒ VT versus SVT with Aberrancy
- ⇒ Pharmacological Tx of Arrhythmias
- ⇒ Noninvasive Hemodynamic Eval
- ⇒ Pulmonary Artery Catheter
- ⇒ Evaluation of Fluid Responsiveness
- ⇒ Ventricular Assist Devices
- ⇒ Shock States
- ⇒ Cardiogenic Shock and the RV

14.0 CE an d 2.0 Pharmacology CE

DATES AND TIMES FOR LIVE VIRTUAL CONFERENCES:

February 22nd & 23rd: 8am to 4:30pm MST

March 3rd & 4th: 8am to 4:30pm CST

Instructors: Karen Marzlin & Cynthia Webner

Can't Attend One of our Virtual Conferences?

Order the recorded version now at a discounted price and view at your own pace. The program will be available to you by March 18th.

We take vast and complex information, synthesize it for you, and present relevant and practical applications.

Day 1 Objectives:

1.Describe conduction system normal anatomy and physiology.
2. Define the physiologic mechanism of AV blocks and resultant rhythm strip criteria for each type of block.
3. Compare and contrast the origins of tachyarrhythmias including conduction abnormalities and impulse initiation.
4. Differentiate AVNRT from AVRT.
5. Review primary treatment strategies in atrial fibrillation including rate control, rhythm control, and stroke prevention.
6. Differentiate VT from SVT with aberrancy utilizing morphological clues on the ECG.
7. Discuss the pharmacological and non pharmacological treatment options for patients with cardiac arrhythmias.

Day 2 Objectives:

1. Correlate physical exam findings with the patient's hemodynamic profile.
2. Describe safe and accurate nursing practices regarding the pulmonary artery catheter.
3. Discuss noninvasive and dynamic measures of preload.
4. Compare hemodynamic presentations of various shock states.
5. Distinguish unique characteristics of right ventricular failure.
6. Identify options for temporary mechanical circulatory support in the setting of shock.
7. Review the pharmacological vasoactive medications used in treating shock states.

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