

To obtain CME credit for The Ali Massumi Cardiac Arrhythmia Symposium, Texas Heart Institute Journal section, you must:

- Carefully read the CME-designated articles marked with a ★ in this issue of the *Journal*.
- Answer the assessment questions below. A grade of 80% must be attained to receive CME credit.
- Complete the brief evaluation.
- Claim your CME credit by mailing the completed assessment and evaluation to the THI Office of CME: 6770 Bertner Ave., MC 3-276; Houston, TX 77030
- The THI Office of CME will grade the assessment. If the score is 80% or higher, a certificate indicating the number of credits earned for participation in the activity will be mailed to you at the address you provide.

Evaluation/Feedback

For assistance with this activity, please contact the Texas Heart Institute Office of CME by telephone (832-355-9100) or by e-mail (cme@texasheart.org).

Assessment Questions

- The principle of ALARA (as low as reasonably achievable) refers to limiting radiation exposure to the patient only.
 - True
 - False
- A patient with ischemic cardiomyopathy who has an LVEF ≤ 0.35 and NYHA class II/III symptoms despite guideline-directed medical therapy, and who has undergone coronary revascularization ≥ 90 days previously, meets class IA indications for an implantable cardioverter-defibrillator as primary prevention of sudden cardiac death.
 - True
 - False
- The left atrial appendage is the major site of thrombus formation in nonvalvular atrial fibrillation (AF) and is responsible for more than 90% of thrombus formations in patients with AF.
 - True
 - False
- Medications that may be used to treat postural orthostatic tachycardia syndrome include β -blockers, midodrine, fludrocortisone, central sympatholytic agents, pyridostigmine, ivabradine, octreotide, and erythropoietin.
 - True
 - False
- Patients with ventricular tachycardia/fibrillation of reversible cause should directly undergo ICD implantation.
 - True
 - False

Using the scale, rate the following:				
	Poor	Fair	Good	Excellent
Relevance of information to your work	1	2	3	4
How well did the section meet its stated learning objectives?	1	2	3	4
	None	Some	Considerably	Exceptionally
Do you believe this activity has contributed to your medical knowledge and skills?	1	2	3	4
Will the information that you received change your medical practice behavior?	1	2	3	4

In your opinion, was the information presented fairly and without commercial or promotional bias? Yes No

Please record one fact or idea that you gained from the section that will be useful to your care of patients.

Comments _____

Print your name _____ Signature _____

Address _____

City _____ State _____ Postal Code _____

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