### CardSAP 2021 Book 2 (*Arrhythmias and Thrombosis*) Release date: November 15, 2021 BCCP test deadline: 11:59 p.m. (Central) on May 16, 2022. ACPE test deadline: 11:59 p.m. (Central) on November 15, 2024.



Continuing Pharmacy Education Credit: The American College of Clinical Pharmacy

and the American Society of Health-System Pharmacists are accredited by the Accreditation Council for Pharmacy Education (ACPE) as providers of continuing pharmacy education (CPE).

**CardSAP Target Audience:** The target audience for CardSAP 2021 Book 2 (*Arrhythmias and Thrombosis*) is board-certified cardiology pharmacy specialists caring for patients who have developed cardiac arrhythmias and/or thromboembolic disorders.

## Module 1 (5.0 CPE) Arrhythmias and Thrombosis I

UAN: 0217-9999-21-258-H01-P

# Chapter: Atrial Fibrillation/Atrial Flutter: Rate and Rhythm Control Learning Objectives

1. Apply current evidence on rate versus rhythm control in the treatment of patients with atrial fibrillation (AF).

2. Design a treatment plan for rate control of AF according to current evidence, patient characteristics, and clinical situation.

3. Develop a rhythm control strategy for AF on the basis of current evidence, patient risk factors, and clinical situation.

4. Evaluate current evidence on the use of catheter ablation in patients with AF.

5. Justify the importance of lifestyle interventions to decrease AF recurrence and burden.

### **Chapter: Atrial Fibrillation/Atrial Flutter: Stroke Prevention Learning Objectives**

1. Develop an anticoagulant regimen for prevention of stroke or systemic embolism in atrial fibrillation (AF) according to AF guidelines.

2. Design a therapeutic plan to manage major drug interactions with direct oral anticoagulants (DOACs).

3. Justify an oral anticoagulant recommendation based on pivotal clinical trial results of DOACs.

4. Develop an anticoagulant regimen for a patient with AF and a bioprosthetic valve or left atrial appendage occlusion.

5. Identify measures to overcome DOAC therapy challenges in a real-world setting.

## Module 2 (6.0 CPE) Arrhythmias and Thrombosis II

UAN: 0217-9999-21-259-H01-P

### Chapter: DOAC Use in Special Populations Learning Objectives

1. Assess patient characteristics that may alter direct oral anticoagulant (DOAC) exposure.

2. Justify use or avoidance of DOACs in patients with characteristics that may alter DOAC exposure.

Justify use or avoidance of DOACs in patients with special indications for anticoagulation.
Evaluate available measures of DOAC effect, and devise a plan on the basis of these laboratory tests.

### Chapter: Torsade de Pointes and Drug-Induced Arrhythmias Learning Objectives

1. Distinguish the differences in the classification and epidemiology of torsade de pointes (TdP) from congenital and acquired long QT syndrome.

2. Distinguish the mechanisms of TdP from other arrhythmias.

3. Assess patients for risk factors for the development of acquired long QT syndrome and TdP.

4. Evaluate risk mitigation strategies for patients at risk of TdP.

5. Develop a strategy for the management of patients with long QT syndrome and TdP.

6. Apply investigational strategies for the prevention or management of long QT syndrome and TdP.

## Module 3 (4.0 CPE) Arrhythmias and Thrombosis III

UAN: 0217-9999-21-260-H01-P

## **Chapter: Venous Thromboembolism**

## Learning Objectives

1. Assess patients for defects in the coagulation cascade and the result on hemostasis.

2. Evaluate risks and benefits of thrombolytic therapy for a patient with a diagnosis of acute venous thromboembolism (VTE).

3. Design a comprehensive VTE treatment plan in various clinical scenarios.

4. Using estimated bleeding and thromboembolism recurrence rates, justify continuing or discontinuing anticoagulation for VTE.

5. Distinguish patient characteristics that favor a specific pharmacologic agent over another for VTE treatment.

## Chapter: Bridging Anticoagulant Therapy Learning Objectives

1. Evaluate the evidence for periprocedural anticoagulation (AC) management.

2. Assess for patient-specific bleeding and thromboembolic risks to assess appropriateness for periprocedural AC.

3. Develop recommendations for interruption of AC based on procedural bleeding risk.

4. Design a bridging regimen with parenteral AC for appropriate patients.

5. Justify opportunities for pathway or protocol development related to periprocedural AC management.

### Module 4 (5.0 CPE) Arrhythmias and Thrombosis IV

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# Recorded Webcast: Recorded Webcast: Physical Examinations for Cardiovascular Medication Management

### Learning Objectives

1. Using specific physical examination data, assess the safety and efficacy of a patient's cardiac medication regimen.

2. Evaluate the cardiac, pulmonary, and lower-extremity components of the physical examination.

3. Distinguish and document pertinent positive and negative physical examination findings for a patient with a cardiovascular condition.

4. Justify referring a patient with cardiovascular disease for further evaluation according to the data collected.

# Interactive Case: Shared Decision Making in the Management of CV Disorders Learning Objectives

1. Assess for common patient perceptions of taking cardiac medications and the impact of polypharmacy and multimorbidity on care.

2. Distinguish between paternalistic and shared decision-making practice models.

3. Assess for patient-specific risks and benefits of continuing, stopping (deprescribing), changing, and starting cardiovascular medications.

4. Justify shared decision-making to help patients reach informed decision related to cardiovascular management.

# Interactive Case: Management of Atrial Fibrillation in Patients Undergoing PCI Learning Objectives

1. Evaluate the ischemic risk of a patient undergoing percutaneous coronary intervention (PCI).

- 2. Classify the bleeding risk of a patient with atrial fibrillation (AF) undergoing PCI.
- 3. Develop an antithrombotic regimen for a patient with AF undergoing PCI.
- 4. Design an anticoagulation plan for a patient with AF undergoing PCI.
- 5. Devise an antiplatelet regimen for a patient with AF undergoing PCI.