

Project ID: 1083E

Activity Evaluation

Please print or type legibly. Your information will be kept completely confidential and will not be shared with anyone.

To assist us in evaluating the effectiveness of this activity and to make recommendations for future educational offerings, please take a few minutes to complete this evaluation form. **You must complete this evaluation form to receive acknowledgment for completing this activity.**

I am a: ☐ MD ☐ DO ☐ PharmD ☐ RN ☐ NP ☐ PA ☐ Other _____

Extent to Which Program Activities Met the Identified Objectives

Please answer the following questions by circling the appropriate rating:

1 = Not Met 2 = Reinforcement 3 = Moderate Improvement 4 = Significant Improvement

After completing this activity, I am now better able to:

Identify signs, symptoms, and prognostic features of ACS	1	2	3	4
Describe the importance of inhibition of platelet aggregation in patients with ACS	1	2	3	4
Explain the recommendations, with the supporting rationale, for use of antiplatelet therapy in ACS management	1	2	3	4
Review the results of pivotal studies involving the use of antiplatelet therapy in patients with ACS	1	2	3	4
Describe the AHA/ACC Guidelines for NSTEMI or UA for the treatment of appropriately risk-stratified patients	1	2	3	4
Restate the efficacy and safety of different antiplatelet agents that may be used in the setting of ACS	1	2	3	4

Overall Effectiveness of the Activity

Please answer the following questions by circling the appropriate rating:

1 = Strongly Agree 2 = Agree 3 = Not Sure 4 = disagree 5 = Strongly disagree

The information presented at this activity was pertinent to my professional needs	1	2	3	4	5
The teaching and learning methods were effective	1	2	3	4	5
The learning assessment used for this activity was appropriate	1	2	3	4	5
The information presented today was current	1	2	3	4	5
The information was presented in a fair and balanced manner and examined the topic with scientific rigor	1	2	3	4	5
The activity was well organized and well managed	1	2	3	4	5
The content of this activity contributes valuable information that will assist me in improving patient outcomes	1	2	3	4	5
Based on my experience today, I would recommend future activities for Diagnosis and Treatment of Acute Coronary Syndrome similar to this to my colleagues	1	2	3	4	5

Impact of the Activity

Did you perceive any bias or commercial influence in the presentation that was given during the activity? ☐ Yes ☐ No

Would patient education materials be helpful to your practice? ☐ Yes ☐ No

Rate the Authors

Please rate the faculty:	Poor-to-Fair		Fair-to-Good		Excellent
1. What was your overall rating of the author? – Christopher P. Cannon, MD (Chair)	1	2	3	4	5
2. What was your overall rating of the author? – Deepak L. Bhatt, MD, FACC, FSCAI, FAHA	1	2	3	4	5
3. What was your overall rating of the author? – E. Magnus Ohman, MD, FRCPI, FACC	1	2	3	4	5
4. What was your overall rating of the author? – Joanne Foody, MD	1	2	3	4	5

Will the information presented cause you to make any changes in your practice? ☐ Yes ☐ No

Please explain the reason for your answer:

Based on your experience, which of the following is the primary barrier to implementing change in performance:

- A. Lack of knowledge regarding evidence-based strategies
- B. Misperceptions of or negative attitudes about research and evidence-based care
- C. Demanding patient workloads
- D. Fears about practicing differently than peers

Based upon the information presented in this educational activity, which of the following statements best reflects your sentiment toward education for Diagnosis and Treatment of Acute Coronary Syndrome?

- A. I have learned everything I need to learn about Diagnosis and Treatment of Acute Coronary Syndrome
- B. I would like to learn more about Diagnosis and Treatment of Acute Coronary Syndrome

We would be interested in using your topic suggestions as a means to develop future education. What general comments or additional topics would you suggest for future activities?

Other comments:

Request for Credit

NAME: _____ DEGREE: _____

I AM A: ☐ MD ☐ DO ☐ PHARMD ☐ RN ☐ NP ☐ PA ☐ OTHER: _____

ORGANIZATION: _____ SPECIALTY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

*EMAIL (REQUIRED TO RECEIVE CREDIT): _____

SIGNATURE: _____ DATE: _____

FOR PHYSICIANS ONLY

Global Education Group (Global) and Carden Jennings Publishing, Co., Ltd. are interested in adding to our base of faculty and education development. To help us better plan for education in this area, and to invite you to partake in future educational development, we may contact you for your expertise. If you opt NOT to be contacted in the future, please check the box below:

☐ NO, I do NOT want to be contacted in the future.

I certify my actual time spent to complete this educational activity to be:

- ☐ I participated in the entire activity and claim 2.0 **AMA PRA Category 1 Credits™**.
- ☐ I participated in only part of the activity and claim _____ credits.

CME Post-Test Answers

- | | | | | | | | | | | | |
|----|---|---|---|---|---|-----|---|---|---|---|---|
| 1. | A | B | | | | 8. | A | B | | | |
| 2. | A | B | C | D | E | 9. | A | B | C | D | |
| 3. | A | B | C | D | | 10. | A | B | C | D | |
| 4. | A | B | C | D | E | 11. | A | B | C | D | |
| 5. | A | B | C | D | E | 12. | A | B | C | D | |
| 6. | A | B | C | D | | 13. | A | B | C | D | E |
| 7. | A | B | | | | | | | | | |

*If you wish to receive acknowledgment for completing this activity, please complete the post-test by selecting the best answer to each question on the back of this form, complete this evaluation verification of participation, and mail or fax to: Global Education Group, 2629 W. Main St., Suite 138, Littleton, CO 80120. **Fax: 303-648-5311**. Only completed forms will be processed for credit. Please allow 6-8 weeks to receive your certificate.*

Thank you for participating in this CME activity. There are no fees for participating and receiving CME credit for this activity. During the period December 2009 through December 2010 participants must 1) read the learning objectives and faculty disclosures; 2) complete the pre-test; 3) study the educational activity; 4) complete the post-test by recording the best answer to each question in the answer key on the back of the evaluation form; 5) complete the evaluation form; and 6) mail or fax the pre-test and evaluation form with answer key to Global Education Group.

1. STEMI patients undergoing reperfusion with fibrinolytics should receive anticoagulant therapy for a minimum of 48 hours.
 - A. True
 - B. False
2. Within my practice, I am comfortable speaking to my patients about the benefits of medication adherence and can discuss ways to overcome barriers to adherence.
 - A. Strongly reject
 - B. Reject
 - C. Neither reject nor accept
 - D. Accept
 - E. Strongly accept
3. In patients with acute coronary syndromes undergoing percutaneous coronary intervention, prasugrel versus clopidogrel results in:
 - A. More efficacy, more bleeding
 - B. More efficacy, less bleeding
 - C. Similar efficacy, less bleeding
 - D. More efficacy, similar bleeding
4. For UA/NSTEMI patients managed with a conservative strategy, unfractionated heparin (UFH) is my preferred anti-coagulant therapy.
 - A. Reject Completely
 - B. Reject
 - C. Neutral
 - D. Accept
 - E. Accept Completely
5. For a patient presenting with a NSTEMI, anticoagulant therapy should be added to antiplatelet therapy as soon as possible after presentation.
 - A. Reject Completely
 - B. Reject
 - C. Neutral
 - D. Accept
 - E. Accept Completely
6. What percentages of patients with ST elevation MI are treated with reperfusion therapy (fibrinolysis or primary PCI)?
 - A. 30%
 - B. 50%
 - C. 80%
 - D. 95%
7. Medically managed patients with STEMI have a lower mortality when treated with clopidogrel?
 - A. True
 - B. False
8. Non-HDL cholesterol is a more important target of therapy than LDL cholesterol in post ACS patients
 - A. True
 - B. False
9. Blood Pressure management post ACS should focus on:
 - A. Ace inhibitors
 - B. Beta blocker
 - C. Non dihydropyridine calcium channel blockers
 - D. Blood pressure lowering irrespective of agent
10. Clopidogrel's mechanism of action is primarily through which receptor?
 - A. Glycoprotein IIb/IIIa
 - B. Adenosine diphosphate
 - C. Thrombin
 - D. Collagen
11. Which of the following is a reversible agent?
 - A. Clopidogrel
 - B. Prasugrel
 - C. Ticagrelor
 - D. Aspirin
12. A 45 year old man s/p NSTEMI has LDL 105, HDL 38, Trig 150, What treatment has been shown to have the greatest benefit this patient?
 - A. Atorvastatin 80 mg with LDL goal < 70 mg/dl
 - B. Simvastatin 20 mg with LDL goal < 100 mg/dl
 - C. Niacin 1 gm titrated upward to 2 gms as tolerated with HDL goal >40 mg/dl
 - D. Simvastatin 20 mg plus a fibrate
13. A 64 year old male is presenting with NSTEMI ACS and chest discomfort over the past 12 hours. Lab tests show an increase in cardiac markers. Cardiac catheterization is planned the following day. Which medication has a Class I recommendation for this patient?
 - A. Enoxaparin
 - B. Fondaparinux
 - C. UFH
 - D. LMWH
 - E. All of the above