

OVERVIEW

Thursday, September 20, 2018

All Day

0830 – 1630 Cardiovascular Health, Wellness and Rehabilitation

Morning

0830 – 1200 Sonographers' Echocardiography Workshop

0830 - 1200 Device/Arrhythmia

0830 – 1200 Heart Failure Workshop

Afternoon

1300 – 1600 ECG Workshop

1300 – 1600 Stress Echocardiography

Evening

1830 – 2030 Challenges in Cardiology

Friday, September 21, 2018

All Day

0830 – 1600 Current Concepts in Echocardiography

Morning

0830 - 1200 Primary Prevention

0800 - 1200 Cardiovascular Nursing

Afternoon

1300 – 1600 Office-Based Cardiology

1300 – 1600 NB Heart Resident Trainee Session

Evening

1730 – 2115 NB Heart Centre Gala Evening

Saturday, September 22, 2018

Morning

0830 – 1300 Current Perspectives in Cardiovascular Disease

NEW BRUNSWICK HEART CENTRE CARDIOVASCULAR SYMPOSIUM

A Message from the Chairman

The New Brunswick Heart Centre's Twenty-Eighth Annual Cardiovascular Symposium will be held September 20 - 22, 2018 in Saint John, New Brunswick.

This year's program has been broadened to give the participant exposure in key areas of cardiovascular medicine. The overall objective of this annual symposium is to provide a comprehensive review in general cardiology, in addition to focused sessions on selected areas of current interest.



On Thursday morning there will be an interactive arrhythmia workshop with a session on interpretive electrocardiography in the afternoon. The Thursday afternoon session will highlight stress echocardiography, with the evening session focusing on challenges facing clinicians in the contemporary management of severe mitral regurgitation. These sessions are intended for cardiologists, internists, cardiac surgeons and other allied health care personnel, offering an integrative approach to commonly encountered management issues. In addition, there will be sessions in cardiac rehabilitation, a heart failure workshop and a sonographers' echocardiography workshop.

Friday has been allocated to specific sessions, including Friday morning, "Primary Prevention" with an innovative and contemporary approach to cardiovascular risk stratification, management of risk factors, HRT and the elderly with cardiovascular risks along with the contemporary approach to cardiovascular effects of marijuana use. In addition, practical solutions to common problems will be reviewed on Friday afternoon, in "Office-Based Cardiology", an all-day session in Echocardiography, a Cardiovascular Nursing session and an afternoon Resident Trainee forum in the management of acute cardiac emergencies.

Friday evening, our annual dinner, will include the public and NB Heart symposium attendees. This will be a relaxing and informative session where Yoni Freedhoff, founder and director of the Bariatric Medical Institute in Ottawa, will discuss his research on the role of sugar in our diet followed by our featured guest, David Coletto, marketing research leader and expert on millennials, who will share his thoughts and experience on how the millennial generation "is changing everything."

Saturday's plenary program is co-sponsored with the Canadian Cardiovascular Society and will review clinically relevant cardiovascular topics, providing the participants with the latest trends in diagnosing and managing patients with heart disease.

The New Brunswick Heart Centre's Annual Symposium has become a forum for clinicians and health care personnel to enhance their knowledge in the field of cardiovascular medicine. This event is recognized throughout Canada as providing a timely and comprehensive review, with emphasis on clinically relevant subjects.

I invite you to participate with your colleagues in this exceptional learning opportunity and look forward to seeing you in September.

David Bewick, MD, FRCP, FACP, FACC

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New Brunswick Heart Centre 28th Annual Symposium Current Perspectives in Cardiovascular Disease

Through participation in the NB Heart Centre's 28th Annual Symposium, attendees will:

- Increase their recognition and comprehension of current advances in the diagnosis and management of disorders of the cardiovascular system.
- Integrate new information, through discussion with cardiovascular experts and colleagues, enhancing their existing expertise and practices related to diagnosis and management of cardiovascular disease.
- Recognize the appropriateness of their current expertise and practices related to diagnosis and management of cardiovascular disease.
- Gain exposure to a wide array of cardiovascular disorders encompassing prevention, acute and chronic management, diagnostic and imaging modalities and rehabilitation.

CONTINUING MEDICAL EDUCATION CREDITS:

This Group Learning program has been certified by the College of Family Physicians of Canada and the New Brunswick Chapter for up to 18.5 Mainpro+ credits.

This event is an accredited group learning activity under Section 1 as defined by the Royal College of Physicians & Surgeons of Canada for the Maintenance of Certification program. This program is approved for a maximum of 17.5 credits by the





Device/Arrhythmia Workshop

Thursday morning, September 20, 2018
Saint John Regional Hospital – Amphitheatre, Level 1D

Challenges and Controversies in Arrhythmias and Devices

Moderator: Michel D'Astous, MD

At the end of this session, participants will be able to:

- Evaluate and incorporate contemporary approaches, treatment and management strategies in patients with atrial and ventricular arrhythmias
- Identify the challenges in the management of patients with an implantable cardiac defibrillator
- Review what is new in the arrhythmia guidelines
- Discuss the assessment and management of patients with clinically important arrhythmias using a case based format

Target Audience:

Physicians Registered Nurses Cardiology Technologists

0730 - 0830

Registration – Level 1, Amphitheatre

0825 – 0830 David Bewick, MD

Welcome and Introduction

Learning Track – Arrhythmia & LV Function

0830 – 0900

Chris Simpson, MD

Arrhythmia-Induced Cardiomyopathies

- 1. PVC-INDUCED CARDIOMYOPATHY Is There Really Such a Thing?
 - PVC's: Not Always Benign?
 - Role of Multimodality Imaging {MRI,CTA}
 - High PVC Burden and LVD Treat All?
 - Management Strategies: "From Drugs To Catheters"
- 2. Tachycardia-Induced Cardiomyopathy {Atrial Flutter/Fibrillation}
- 3. Ventricular Paced Rhythm Is There Any Role for VVI Pacing With Sinus Rhythm in 2018?

Learning Track – Controversies in Ablation

0900 – 0930 John Sapp, MD

- Congestive Heart Failure with Atrial Fibrillation Time to Consider Ablation Before Amiodarone?
- 2. Ventricular Tachycardia in the Abnormal Heart –should we be impelled to do more...?
- 3. Ventricular Tachycardia in the Normal Heart: When Should I Worry?
 - a. RV Outflow Tract: Always Benign?
 - b. Non-Outflow Right Ventricular Tachycardia: Is It Always Dysplasia?

Learning Track – Guidelines

0930 – 1000

Ciorsti MacIntyre, MD

What You Need To Know In The New Guidelines

- My Patient Has Cardiac Sarcoid Does She Need An ICD?
- My Patient Is Obese + AF Does He Need to Lose Weight <u>Before</u> Considering Ablation?
- My Patient With Syncope Has a Family History of Unexplained Death What Next?
- My Patient with a Non-Ischemic Cardiomyopathy and EF 30%: Yay or Nay to the ICD?

1000 – 1030

Nutrition Break - Please visit our exhibitors in the Light Court.

Case Discussions – Controversies & Uncertainties with Arrhythmias

1030 – 1200

Expert Panel

John Sapp, MD Sean Connors, MD Ciorsti MacIntyre, MD

Moderator: Sean Connors

- 1. High Atrial Rates Found In The Pacer Clinic. When To Anticoagulate
- Atrial Flutter And Atrial Fibrillation: More Similar Than Different Or More Different Than Similar?
 Who Should Get a Leadless Pacemaker In 2018?
- My Pacemaker Dependent Patient Has a Non-Conditional ICD System How Can She Have an MRI?
- Extensive Anterior Infarct with LAD Stented/Normal RCA/Cx with EF 20% Wait 6 Weeks or Implant ICD or Time for Wearable Vest?
- 50 yr. Male with Out of Hospital Cardiac Arrest, TnT 500 and Occluded Small OM Branch/ Normal EF and NSVT Day 3 in CCU – ICD?

1200 - 1300

Lunch - Please visit our exhibitors in the Light Court.

Sonographers Echocardiography Workshop

Thursday morning, September 20, 2018
Saint John Regional Hospital – Amphitheatre 5D
Chair: Susan Fagan, MD

 Review concepts Recognize pitfal Identify current in Review pearls are 	on, participants will be able to: s in achieving accurate measurements of cardiac structures ls in doppler echocardiography methods in the assessment of diastolic function and pitfalls of assessment of aortic and mitral regurgitation a live and interactive session how to perform strain	Target Audience: Sonographers Cardiologists & Internists Cardiology Technologists	
0730-0830	Registration – Level 1, Amphitheatre		
0825 – 0830 Susan Fagan, MD	Welcome and Introduction		
0830 – 0850 Paul MacDonald, MD	Assessment for Tamponade, Constriction and Restriction The presentation will review echo features for diagnosis of constrictive pericarditis and differentiation from restrictive cardiomyopathy as well as from tamponade. Clinical cases for correlation will be included.		
0850 – 0915 David McFarlane, MBBS	Evaluation of Diastolic Function and Filling Pressures The speaker will discuss the implementation and ramifications of the ASE/EACVI Diastology Guidelines.		
0915 – 1000 Sue Fagan, MD	Approach to Aortic and Mitral Regurgitation This review will discuss the challenges encountered when determining the severity of aortic and mitral regurgitation by echo and doppler parameters. An approach to reporting discordant values will be discussed.		
1000 – 1030	Nutrition Break – Please visit our exhibitors in the Light Court.		
1030 – 1055 Jeff Moore, MD	Assessment of Prosthetic Valve Dysfunction – Pearls And Pit This session will review how to perform a comprehensive assess prosthetic heart valves to investigate for possible dysfunction. To fithe various structures and flow dynamics of prosthetic valves, pathologies. Complementary information can be obtained from imaging.	ment of mechanical and bio- This requires understanding and the impact of different	
1055 – 1120 Sara Ramer, MD	Approach to Common Congenital Heart Defects Repaired (ASD, Tetralogy of Fallot, Transposition of Great Arteries) A practical approach to common congenital heart disorders will be reviewed along with important abnormalities found in the adult.		
1120 – 1140 Sabe De, MD	"POCUS" – What Is It And When To Use It POCUS or "Point of Care Ultrasound" has gained widespread use in a variety of settings, even being taught in medical school curriculum. This talk will examine the use of handheld ultrasound in a variety of clinical settings and the indications for its use in detecting cardiac pathology.		
1140 – 1200 Chi-Ming Chow, MD	What's New in Machine Quantification and Artificial Intelligence This presentation will cover the role of AI in echocardiography with the underlying principles of machine learning and deep learning, outline current uses of AI in echocardiography such as automation and clinical pathologic recognition, and discuss potential limitations and challenges of AI in the future.		
1200 – 1230 Sabe De, MD Jason Michalakos, BSc RDCS	POCUS Workshop This workshop will provide the participant with the opportunity of several contemporary POCUS devices. Device features including age will be reviewed as well as a succinct approach to performing ment for cardiac pathology (LV dysfunction, tamponade, pulmor status. A brief approach to pulmonary pathology (pleural effusion be discussed.	g image optimization and stor- ng a rapid emergency assess- nary embolism) and volume	
1230 – 1300	Lunch – Please visit our exhibitors in the Light Court.		

Stress Echocardiography

Thursday afternoon, September 20, 2018
Saint John Regional Hospital – Amphitheatre Level 5D
Chair: David Bewick, MD

Discuss the utility patients with vaDiscuss the role	ty of stress echocardiography in the evaluation and management of lvular heart disease Inter of stress echocardiography in hypertrophic cardiomyopathy e practical application of stress echocardiography utilizing a case cardiology Technology T	gists nists hers	
1200 – 1250	Registration – Level 1, Amphitheatre		
1255 – 1300 David Bewick, MD	Introduction		
St	tress Echo in Valvular Heart Disease – Reporting & Clinical Implications		
	 Symptoms Despite Non-Severe Valvular Disease Asymptomatic But Severe Valvular Disease 		
1300 – 1330	Part 1 – Aortic Stenosis		
Howard Leong-Poi, MD	1. Asymptomatic Aortic Stenosis		
	2. Low Flow, Low Gradient, Low EF Aortic Stenosis		
	 Role of DSE – Does It Even Matter With TAVI? 		
	 "Projected Valve Area" – What Is It & Should It Be The Norm?" 		
	Role of Multimodality Imaging		
1330 – 1400	Part 2-Mitral Valve Disease		
Anthony Sanfilippo, MD	Mitral Stenosis		
	Mitral Regurgitation		
	Stress Echo in Hypertrophic Cardiomyopathy		
1400 – 1430	Role of Stress Echocardiography in the Evaluation and Management of Hypertrophic		
David Bewick, MD	Cardiomyopathy Everyopa testing provides important information on the functional limitations in national with	h	
	Exercise testing provides important information on the functional limitations in patients wit a hypertrophic cardiomyopathy. Stress echocardiography has been underappreciated in the		
	context of HCM. This review will discuss the merits and limitations of including this imaging		
	modality in the investigation and management of the patient with HCM.		
1430 – 1450	Nutrition Break – Please visit our exhibitors in the Light Court.		
1450 – 1600	Case Presentations		
Ron Bourgeois, MD			
Michel D'Astous, MD			
Sarah Ramer, MD			
David Bewick, MD			

Electrocardiography (ECG) Workshop

Thursday afternoon, September 20, 2018 Saint John Regional Hospital – Amphitheatre 1D

Chair: Fred Paulin, MD Expert Panel: Samuel Wang, MD & Satish Toal, MD

Interpret the Education about the Discuss manage	ion, participants will be able to: CG in a variety of cardiovascular disorders including ACS, normalities and tachyarrhythmias ement strategies utilizing the electrocardiogram enly encountered issues with various conduction abnormalities Target Audience: Cardiology Technologists Registered Nurses		
1200 – 1250	Registration – Level 1, Amphitheatre		
1255 – 1300	Welcome and Introduction		
Fred Paulin, MD			
1300 – 1320	LQT - How to Measure the QT and How Long Is Too Long?		
Ciorsti MacIntyre, MD			
1320 – 1340	10 ECGs Every ER DOC & ECG Tech Should Recognize		
David McFarlane, MBBS			
1340 – 1400	Where Is the P Wave?		
Samuel Wang, MD	Approach to Atrial Flutter & SVT Case based, interactive sessions on ECG recordings. Learn some tips and tricks that may help you in your own practice. How to look smart in your referrals.		
1400 – 1430	Common Problems with Pacemakers and Defibrillators and How to Recognize Them		
Fred Paulin, MD	This session will provide an overview of normal pacemaker and ICD functions and behavior on ECG tracings. We will then go through ECG examples of common pacemaker and ICD malfunction and normal behavior which may require intervention.		
1430 – 1450	Nutrition Break – Please visit our exhibitors in the Light Court.		
1450 – 1600	Cases, Cases and More Cases		
Moderator	1. Borderline ECG – Does This Count?		
Fred Paulin, MD	 Grouped Beating – Order To the Chaos Tachyarrhythmias in the CCU 		
Expert Panel	4. Heart Block		
Satish Toal, MD	5. The "Brugada ECG"		
Samuel Wang, MD	 Torsades de Pointes Is This Pacemaker Working? 		
	8. The Abnormal ECG – Should I worry about sudden death?		

Cardiovascular Health, Wellness and Rehabilitation

Thursday, September 20, 2018
Saint John Regional Hospital – Level 5D Classroom
Moderator: J. Stephen Mundle

At the end of this session, participants will be able to:

- Discuss optimal systems and strategies in the management of patients with cardiovascular disorders
- Evaluate quality indicators in cardiac rehabilitation
- Incorporate current and emerging clinical evidence in the comprehensive assessment, treatment and management of patients with cardiovascular disease

Target Audience:

Cardiovascular Nurses Physicians Physiotherapists Dietitians Allied Healthcare

0730 - 0830

Registration - Level 1, Amphitheatre

Learning Track: Research

0830 – 1000 Martin MacKinnon, MD Shelley Nairn, RN Sarah Melville, BSc (Hons) CRA

Changes and Controversies in Hypertension Management: A Practical Review of the Current Clinical Guidelines

This will be a multidisciplinary team presentation by a physician, a nurse, and a research associate. We will focus on the practical application of the current hypertension clinical guidelines with an emphasis on a perspective from clinicians of the evidence-based recommendations to accurately confirm a diagnosis of hypertension and to appropriately manage medications.

1000 – 1030

Nutrition Break - Please visit our exhibitors in the Light Court.

Learning Track: Cardiology

1030 – 1100 Robert Stevenson, MD Update on Sports Participation: The Role of Cardiology in Assessment of Fitness to Participate in Athletics

Learning Track: Program Networking

1100 – 1130 **ACRN AGM** – Kristen Copp 1130 – 1200 **CRNB AGM** – Monique Dufour

1200 – 1300

Lunch - Please visit our exhibitors in the Light Court.

Learning Track: Nutrition

1300 – 1400 Monique Babineau, RD

A Food Guide Update and Evidence-Based Nutrition for Vascular and General Health

Canada's Food Guide has undergone many modifications over the past decades. This review will highlight the upcoming Food Guide related changes as well as discuss popular diets related to heart health.

Learning Track: Endocrinology

1400 – 1500 Stephen Hull, MD

Diabetes Management in Cardiac Rehab

The speaker will discuss the effect of exercise on glucose control and strategies to prevent glucose variation during and after exercise. A general update on newer diabetes medications will

also be discussed.

1500 – 1530 Nutrition Break – Please visit our exhibitors in the Light Court.

Learning Track: Psychology

1530 – 1630 What's the Trick? Challenges of Treatment Non-Compliance

Janet Krantz, PhD Helpful communication strategies with treatment non-compliant patients.

Cardiovascular Health and Wellness

Thursday, September 20, 2018 Saint John Regional Hospital – Cafeteria AB

Moderator: Kim Anderson, MD

Discuss the challenges in the management of heart failure in an outpatient setting and

Target Audience:

Cardiovascular Nurses

Heart Failure Sessions

At the end of this session, participants will be able to:

in preserved LV • Approach the e	function Valuation and management of heart failure in an outpatient setting and Cardiovascular Nurses Physicians valuation and management of pulmonary hypertension Dietitians dications and guidelines with device therapies in the patient with Allied Healthcare		
cardiovascular c	5		
0730 – 0820	Registration – Level 1, Amphitheatre		
Learning Track	Pharmacology		
0830 – 0900 Kim Anderson, MD	How to Titrate Meds in Out-Patients With Heart Failure: Real-World Challenges This session will review medications used in the treatment of heart failure. We will also discuss the fine balance between appropriate evidenced based medicines for symptom control/prolongation of life and polypharmacy		
Learning Track	Diastolic Dysfunction		
0900 – 0930 Jeff Moore, MD	Heart Failure with Preserved Ejection Fraction: Where are we in 2018? Nearly half of patient with heart failure have an EF >50%, yet many still have significant symptoms and mortality rates similar to patients with reduced EF. HFpEF includes a heterogenous group of patients, although many have a combination of comorbidities including hypertension, CAD, obesity, metabolic syndrome, sedentary lifestyle, and aging. Atrial fibrillation is commonly associated and is poorly tolerated as a result of increased heart rate and loss of "atrial kick". Unfortunately despite efforts to date, major clinical trials in HFpEF have not yet identified effective treatment options. Blood pressure control, diuretic therapy, and risk factor modification are important.		
Learning Track	Cardiac Surgery		
0930 – 1000 Jean François Légaré, MD	When Expectations and Reality Clash Patients with ischemic cardiomyopathy come back from cardiac surgery expecting to "be better". Can we predict who will improve?		
1000 – 1030	Nutrition Break – Please visit our exhibitors in the Light Court.		
Learning Track	Electrophysiology		
1030 – 1100 Samuel Wang, MD	Devices: Technical and Psychological Issues Nurses in the Heart Function Clinic, always have questions regarding devices. This talk will include: remote monitoring, when should patients call the ICD clinic, troubleshooting ICDs and psychological aspects of having a device/deactivating the device.		
Learning Track	Pulmonary Hypertension		
1100 – 1120 Sohrab Lutchmedial, MD	The Role of Cardiac Catheterization and PCI in the Assessment of A Patient With Congestive Heart Failure When a patient presents with congestive heart failure, invasive cardiac investigations are often requested – which can lead one down the 'rabbit hole.' When are these tests warranted, and what benefits do they offer patients? When should they be avoided?		
1120 – 1200 Kristina Kemp, MD	Assessment for Pulmonary Arterial Hypertension Clinical Role of echo and right heart catheterization in diagnosis and follow-up Other investigations including screening blood work, PFT,CT, V/Q		
1200 – 1300	Lunch – Please visit our exhibitors in the Light Court.		

Challenges in Cardiology

Thursday evening, September 20, 2018 Royal Ballroom, Delta Saint John Hotel, 39 King Street

> Chairman: David Bewick, MD Co-Chairman: Sohrab Lutchmedial, MD

Severe Mitral Regurgitation The Present and Future – Novel Approaches to the Mitral Valve

 At the end of this session, participants will be able to: Incorporate current and emerging clinical evidence in the evaluation and management of severe mitral regurgitation Evaluate and employ contemporary percutaneous and surgical approaches to severe mitral regurgitation Review the current and future role of echo and multimodality imaging in the evaluation of mitral regurgitation 			Target Audience: Cardiologists Internists Cardiac Surgeons Vascular Surgeons Allied Healthcare
1730 – 1820	Buffet Supper – Delta Brunswick Hotel		
1825 – 1830 David Bewick, MD Sohrab Lutchmedial, MD	Welcome and Introduction		
1830 – 1850	The Integral Role of Mitral Val	lve Imaging	
Dinesh Thavendiranatham, MD	 Echo, CT, CMR – "So Many Opt 		
	 Defining "Severe" Secondary Mitral Regurgitation 		
Imaging Approach to Ischen		Vs. Degenerative Mitral	Regurgitation
1850 – 1910	State of the Art: "Transcatheter Mitral	Valve Interventions"	
Josep Rodés-Cabau, MD	Mitraclip		
	Coronary Sinus Annuloplasty Bands		
	Transcatheter Mitral Valve Repla	acement	
1910 – 1930	Is Surgery <u>Still</u> the Gold Stand	lard for Treatment of I	Mitral Valve
Denis Bouchard, MD	Regurgitation?		
	Mechanical Versus Bioprosthetic Valve in Young Versus Older Patient		
	Concomitant Management of Tricuspid Regurgitation, Left Atrial		
	Appendage and AF		
	Minimally Invasive Versus Sternal Approach Pala of Balantia Communications		
1020 2020	Role of Robotic Surgery		
1930 – 2030 Co-Chairs: David Bewick, MD Arsene Basmadjian, MD	The Master's Class Challenging Cases with Severe Mitral Regurgitation Cases will be presented by Doctors Bewick and Basmadjian and discussed with the expert panel.		
Expert Panel: Sohrab Lutchmedial, MD Dinesh Thavendira Jean-François Légaré, MD Denis Bouchard, N Josep Rodés-Cabau, MD			

Current Concepts in Echocardiography

Friday, September 21, 2018
Saint John Regional Hospital – Amphiteatre, Level 5D
Chairman: David Bewick, MD

At the end of this session, participants will be able to:

- Evaluate and employ contemporary approaches utilizing echocardiography in patients with congestive heart failure and complex valvular heart disease
- Review role of multimodality imaging in contemporary cardiology
- Review the evolving importance of multimodality imaging in valvular heart disease and cardiomyopathies
- Approach to the assessment of endocarditis and pericardial disorders
- Discuss the practical utility of echocardiography using a case based format

0730 - 0830

Registration - Level 1, Amphitheatre

Learning Track – Heart Failure

0830 – 0900 Anthony Sanfilippo, MD

The Ejection Fraction in Heart Failure: A "Tarnished" Gold Standard and Time to Move On Beyond the EF?

- a. Why EF Is Overrated Is there anything else to assess HFpEF & HFrEF?
- b. Chamber Quantification and Advanced Evaluation of Function In Heart Failure?

Target Audience:

Cardiac Surgeons

Cardiologists

Sonographers Allied Healthcare

Internists

c. The Growing Importance of Strain Imaging & Other Imaging Modalities

0900 – 0930 Kim Connelly, MD

The Evolving Importance of MRI and CTA Imaging in Diagnosis and Management of Non-Ischemic Cardiomyopathies

- Myocarditis
- · Dilated cardiomyopathy
- Amyloid
- Sarcoid
- Hypertrophic cardiomyopathy
- Non-compaction

Learning Track – Guidelines

0930 - 1000

Dinesh Thavendiranatham, MD

Practical Application of the ASE and AHA Latest Valve Guidelines

- Assessing MR The Top 5 Errors Commonly Made
 - Degenerative MR
 - Functional MR
- Aortic Regurgitation
- Functional Tricuspid Regurgitation

1000 – 1030

Nutrition Break - Please visit our exhibitors in the Light Court.

Learning Track – Valvular Heart Disease

1030 – 1100 Ian Burwash, MD

Aortic Stenosis & the Dyspneic Patient - The Contemporary Challenges in 2018

- 1. 86 yr. Old with CHF & Aortic Stenosis –"Watch and Wait or TAVR?
 - a. AVA 1.0 sq. cm & EF 20%
 - b. AVA 0.6 sq. cm & EF 70% with Mean AVG 25 mmHg
- Mixed Aortic Valve Disease with "Moderate AS/AR" A New Disorder? {LVH+Volume=<u>Trouble</u>}

Cardiac Imaging in Complex Endocarditis - When to Intervene

1100 - 1140

Kwan Leung Chan, MD

- Concerning Echo Features and Role of TEE
- Diagnosis of Prosthetic Valve Endocarditis and Device Infections
- New Guidelines Utilizing Evolving Imaging Techniques in Suspected SBE

1140 – 1200 Jean-François Légaré, MD

Surgeon's Perspective on Endocarditis

 Timing of Surgery and Impact of Echo in Clinical Decision Making {Abscess, Stroke, Size Of Vegetation}

o Lessons Learned with IV Drug Abuse, Endocarditis & Prosthetic Valve Endocarditis

1300 – 1330	Prosthetic Valve with High Gradient		
Sharon Mulvagh, MD	 Is This Patient Prosthesis Mismatch? Prosthetic Valve Thrombosis & Subclinical Leaflet Thrombosis of Bioprosthetic Valve – What Is It and How to Manage Post TAVI High gradients 2-3+ AI Post TAVI – What Does It Mean & Prognosis? 		
1330 – 1400	Uncommon Etiologies of Valvular Heart Disease		
Chi-Ming Chow, MD	This presentation will use a case-based method to cover uncommon etiologies of valvular heart disease, such as radiation-induced valvulopathy, calcific mitral stenosis, valves affected by systemic disorders and trauma.		
1400 – 1430 Howard Leong-Poi, MD	Complicated Pericarditis – Defining and Detecting the Abnormal Pericardium • Echo – what you see and what you don't • The evolving role of multimodality imaging • Imaging guided therapy		
1430 – 1450	Nutrition Break – Please visit our exhibitors in the Light Court.		
1450 – 1600	Case Presentations		
Sabe De, MD Chi-Ming Chow, MD Susan Fagan, MD			

Please note that 25% question/answer time is included in each lecture/presentation time allotment.

Howard Leong-Poi, MD Kwan-Leung Chan, MD Ian Burwash, MD

Primary Prevention

Friday morning, September 21, 2018 Saint John Regional Hospital – Amphitheatre, Level 1D

Moderator: Paul MacDonald, MD

At the end of this session, participants will be able to:

- Incorporate current and emerging clinical evidence in the comprehensive assessment, treatment and management of patients at increased risk of cardiovascular disease
- Evaluate new evidence in HRT in prevention of CVD in women
- Interpret the impact of various behavioural, nutritional and "preventive" therapies in 2018
- · Identify the challenges and management of the elderly in "reducing" cardiovascular risk
- Evaluate the challenges with marijuana use in 2018
- Identify the issues surrounding physician "burnout"

Target Audience:

Family Physicians Nurse Practitioners Internists/Cardiologists Registered Nurses Allied Healthcare

0730 – 0825	Registration – Level 1, Amphitheatre	
0825 – 0830	Welcome and Introduction	
Paul MacDonald, MD		

Learning Track – Cardiovascular Risk Assessment

0830 – 0900 "Things You Need to Know!" – The Basics of Cardiovascular Risk Assessment in the Office Calculators In 2018 – A Moving Target?

- Use and Misuse of Risk Calculators A Moving Target
- Is Framingham Still Relevant in 2018?

Learning Track – CVD Prevention with Unhealthy Habits

0900 – 0930

Turning "Bad" Choices Into Beneficial CVD Prevention Habits

Dayna Lee-Baggley, PhD

- How to focus the "conversation" when your patient will not do what you tell them!
- Teaching patients about weight loss strategies, healthy nutrition, physical activity and behaviour changes

This review will discuss how to turn "bad" choices into beneficial CVD prevention habits along with the physician's role in patient decision making.

Learning Track - Controversies and "Myths" in Cardiovascular Prevention and HRT

0930 – 1000 Beth Abramson, MD

Menopausal Hormone Replacement and Preventing Heart Disease In Women – What Do We Know In 2018?

- Current thinking on use of menopausal hormone therapy
- Does it matter when you initiate menopausal hormone therapy?
- What specific menopausal hormone therapy options should one use?
- What are the risks & who should not be prescribed menopausal hormone therapy?

1000 – 1030

Nutrition Break - Please visit our exhibitors in the Light Court.

Learning Track – Elderly and Polypharmacy

1030 – 1100 Sarah Ramer, MD

Primary Prevention In the Very Elderly {>80 Yrs.}

"Rapid Fire Answers"

- ASA in "Primary Prevention"
- Is it ever too late for statin therapy?
- My active asymptomatic 90 yr. patient with a supine BP 196/68 and standing, 148/62
- Commonly used supplements which are suitable and unsuitable? {Vitamin B,D & E, Fish oil as good as fish?}

Learning Track – Behaviour

1100 – 1130 Chris Simpson, MD

The Growing Problem of Physician Burnout: Building Resiliency in an Era of Accelerating Change

Physician burnout is on the rise. Many factors have been implicated, including unfavourable work-life balance ratios, working in restricted resource environments, an increasingly crowded environment of regulations and reporting requirements, and the sheer volume of knowledge and skills that are required to care for patients well. On top of all this, mental health stigma remains very much alive in medical culture. Do we need to change the way we work or do we need to enhance our resiliency? This discussion will explore the current state and look at strategies for improvement.

Learning Track - Medical & Recreational Cannabis

1130 – 1200 Andrew Pipe, MD

Controversies and Cannabis – Get Ready!

- Pharmacology of Marijuana and Cardiovascular Disease
- Cardiovascular Effects of E-Cigarettes and Concomitant Smoking/ Marijuana
- Cannabis "Edibles" What You Need to Know?

1200 – 1300

Lunch - Please visit our exhibitors in the Light Court.

Office-Based Cardiology

Friday afternoon, September 21, 2018 Saint John Regional Hospital – Amphitheatre, Level 1D

Moderator: Simon Jackson, MD

At the end of this session, participants will be able to:

- Incorporate current and emerging clinical evidence in the comprehensive assessment and management of patients with pericarditis
- Evaluate and employ contemporary approaches, treatment and management strategies in patients with atrial fibrillation and anticoagulation
- Identify and review patients with cardiovascular disease who require SBE prophylaxis
- Evaluate the patient with CAD and role of exercise
- Review approach and management of CHF with normal systolic function
- Evaluate and manage patients with severe edema and a foot ulcer

Target Audience:

Family Physicians Nurse Practitioners Internists/Cardiologists Registered Nurses Allied Healthcare

1230 – 1300	Registration – Level 1, Amphitheatre
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1255 – 1300 **Welcome and Introduction** Simon Jackson, MD

Learning Track – Contemporary Issues with Anticoagulation & Atrial Fibrillation

1300 – 1320 Sean Connors, MD

Office Issues With NOACs

- Dental work
- Arthroscopy & Colonoscopy
- Epistaxis & Hematuria
- 64 year old Female with Rheumatoid Arthritis and "Cannot Live Without NSAID"

1320 – 1340 Ciorsti MacIntyre , MD

My Patient Has Asymptomatic Atrial Fibrillation and A Heart Rate of 100-110/Min

- "My Frail 88 Yr. Old Patient:" Use and Misuse of Direct Oral Anticoagulants and Warfarin
- Initial Approach to Rate Control, Investigations and Follow-Up
- Do I Need To Refer Everyone?

Learning Track – Pericardial Disorders

1340 – 1400

Contemporary Management of Pericarditis

Simon Jackson, MD T

The contemporary management of acute and recurrent pericarditis has evolved and this review will discuss when, what and how to use NSAID`s, colchicine, steroids and immunosuppressive therapies along with the duration of treatment.

Learning Track - Chest Pain

1400 – 1420

The Middle-Aged Athlete with Coronary Artery Disease

Kim Connelly, MD

- Diagnostic Evaluation
- Management
- Return to exercise prescription and intensity of exercise

1420 – 1445

Nutrition Break - Please visit our exhibitors in the Light Court.

Learning Track – Heart Failure and Normal EF

1445 - 1505

Where Are We With CHF and EF >60%?

Kim Anderson, MD

- What is new in pharmacological management?
- Common Office Mistakes in Heart Failure Management
- How to Use the BNP?

Learning Track – Therapeutics

1505 – 1525 Barry Rose, MD

- 1. SBE Prophylaxis The Latest Guidelines
 - Who Should and Should NOT Get Preventive Antibiotics?
 - What Antibiotic, What Dose and What Duration?
- 2. Top 10 Cardiac Medication Blunders in 10 Minutes

Learning Track – End Stage Heart Disease

1525 – 1550

Persistent Infected Foot Ulcer With Severe Edema – "Not Just Skin Deep"

• Managing a Chronic Infected Skin Ulcer

Duncan Webster, MD

- Approach to Chronic Venous Insufficiency and Lymphedema
- "How do I convince my patient to use compression stockings?"

1550 – 1600

Concluding Remarks

Cardiovascular Nursing

Friday, September 21, 2018 Saint John Regional Hospital Facilitator: Susan Morris, RN

Chronic Heart Failure

Karen Harkness, RN PhD CCN(C) CHFN-K

Please join the New Brunswick Heart Centre and the Canadian Council of Cardiovascular Nurses as we explore Chronic Heart Failure through a nursing lens. This workshop will provide a general overview of chronic heart failure management using case scenarios. Key topics include pathophysiology, patient fluid assessment and common pharmacological and non-pharmacological management, as guided by the newly published 2017 heart failure guidelines by the Canadian Cardiovascular Society. Using case scenarios, participants will explore practical tips for assessment and management of patients with heart failure symptoms. A brief introduction to implantable cardioverter defibrillators and their role in end-of-life planning will also be provided.

After this symposium, participants will be able to:

- 1. Employ practical tips for completing an assessment of patients with heart failure
- 2. Interpret the evidence-based pharmacological management of chronic heart failure
- 3. Employ practical tips for creating a patient-centered approach to medication optimization and self-care strategies
- 4. Understand the role of cardiac devices and end-of-life planning

0730 – 0800	Registration – Level 1, Amphitheatre		
0800 – 0815 Susan Morris, RN	Welcome and Introduction		
0815 – 1000	Overview of the Pathophysiology Related to Heart Failure		
	Signs and Symptoms of Heart Failure		
	Assessment of Patients With Heart Failure		
	Strategies to Support Self-Care Management		
1000 – 1030	Nutrition Break – Please visit our exhibitors in the Light Court.		
1030 – 1115	Overview and Update of Evidence-Based Pharmacological Therapy In Chronic Heart Failure		
1115 – 1200	Overview of Cardiac Devices (E.G. Implantable Cardioverter Defibrillator)		
	Options for Cardiac Devices and End of Life Planning		

NB Heart Resident Trainee Session

Friday, September 21, 2018 Saint John Regional Hospital **Moderator: Colin Barry, MD**

Critical Care Cardiology

 Discuss the approa Evaluate the role of Incorporate approa Discuss the approa Review the important cardiovascular dise Approach to the tr 	participants will be able to: ach to a patient who had a cardiac arrest if an LVAD in severe heart failure aches to the emergency management of atrial fibrillation ach and management of thromboembolic disorders ant role of the chest x-ray in evaluating a patient with asse eatment of severe pulmonary hypertension role of digitalis in cardiovascular disorders Target Audience: Family Medicine Residents Nurses Emergency Physicians Cardiologists/Internists Cardiac Surgeons	
1230 – 1255	Registration – Level 1, Amphitheatre	
1255 – 1300 Colin Barry, MD	Welcome and Introduction	
1300 – 1320	Cardiac Arrest: What to Do With the Patient	
Barry Rose, MD	Cooling, Cath and Management (eCPR)	
1320 – 1345 Patrick Bergin, MD	 Controversies in Thromboembolic Disorders Role of Catheter-Directed Thrombolysis in Acute DVT – 1st Line Therapy for Proximal DVT? Long-Term Anticoagulation Should Be Standard of Care for Most VTE Patients? 	
	Acute PE – Role of Lysis Or Not?	
1345-1410 Kristina Kemp, MD	Basics of Pharmacotherapy in Severe Pulmonary Arterial Hypertension Review of medical treatments used in the management of PAH including conventional medications as well as pulmonary vasodilator therapies	
1410 – 1430 Fred Paulin, MD	"I Am Called at 0300 to Orthopaedics for Patient With Atrial Fibrillation at 180/Min" – Management of Peri-Operative Atrial Fibrillation	
	This session will go over acute management options for atrial fibrillation. We will define atrial fibrillation due to a secondary cause. (ie Post-op, infection,). We will discuss long term management of atrial fibrillation in this context.	
1430 – 1500	Nutrition Break – Please visit our exhibitors in the Light Court.	
1500 – 1520 Darren Ferguson, MD	Management of Acute Thrombotic Stroke – Moving Beyond Thrombolysis • Contemporary Role of Mechanical Thrombectomy in 2018 The presentation will provide an overview of Hyper-acute Stroke Intervention, from current concepts of evidence-based decision making to the various devices now available. The Heart & Stroke Foundation of Canada Clinical Best Practice Guidelines will be reviewed.	
1520 – 1540 Jean-François Légaré, MD	 The LVAD in Advanced Heart Failure What is the contemporary role of an LVAD as "destination therapy" only? 	
1540 – 1600 Masis Perk, MD	Digoxin Therapy in 2018 – When and How to Use It Digoxin is used worldwide as an orally available and affordable inotrope which is falling from favor both in office practice and in the classroom. We discuss the pathophysiological rationale for its use and caution against "lanatophobia" and its foreseeable consequences.	

NB Heart Centre Symposium Gala Evening

Friday evening, September 21, 2018 Royal Ballroom, Delta Saint John Hotel, 39 King Street Chairman: David Bewick, MD

Masters of Ceremony: Ansar Hassan, MD & Sohrab Lutchmedial, MD

Cash Bar & Seating 1730 – 1820

Welcome and Introduction

Please take a seat, relax and enjoy the presentations. During the sessions, dinner will be served to your table.

New Brunswick Heart Centre Celebrating Three Decades of First-Rate Cardiac Care

Reflecting on our past and looking forward to the future Jeff McAloon CEO Saint John Hospital Foundation

Regardless of Whether Sugar's "Toxic", We're Eating (And Using) Way Too Much of It

Yoni Freedhoff, MD, Founder & Director Bariatric Medical Institute, Ottawa, Ontario

While there's still debate on whether sugar is in and of itself uniquely "toxic", there's no debating the fact that the consumption of excess added sugar confers significant metabolic risk. And given we're all eating a tremendous amount of the stuff, it might be worthwhile, to spend some time watching a "Shock and Awe-ful" review of just how firmly entrenched the use of sugar has become to reward, pacify and entertain us at every event, no matter how small.



David Coletto

The Millennials: How This Generation is Changing Everything

Through an engaging and interactive presentation, David gives his audience a unique perspective on who Millennials are, why are they are so different, and what organizations need to know to manage them.

Having conducted research on Millennials for the past six years, David's insights are research-based, balanced, and respectful. He takes his audience on a journey to understand why Millennials are the way they are, what makes them different, and how they are impacting your organization.

Current Perspectives in Cardiovascular Disease

Saturday, September 23, 2017 Saint John Regional Hospital – Amphitheatre, Level 1D

Chairman: David Bewick, MD
Co-Chair: Barry Rose, MD

At the end of this session, participants will be able to:

- Evaluate and employ contemporary approaches, treatment and management strategies in patients with ACS and stable CAD
- Identify new approaches to managing diabetes and impact on CV mortality
- Incorporate new options in the management of dyslipidemia and congestive heart failure
- Identify the mechanisms and management strategies of ACS syndromes in young women
- Evaluate topical issues in diet, obesity and nutrition and cardiac rehabilitation in modifying CVD risk
- Interpret the impact of recent clinical trials and discuss optimal strategies in the assessment and management of patients with cardiovascular disorders, including issues in anticoagulation, stroke prevention and hypertension

Target Audience:

Family Physicians
Cardiologists
Internists
Cardiac Surgeons
Nurses
Allied Healthcare

0730 - 0815

Registration - Level 1, Amphitheatre

0825 – 0830 Barry Rose, MD

Introduction

Learning Track: Coronary Artery Disease & Pharmacotherapy

0830 – 0900 Milan Gupta, MD

Secondary Prevention Post ACS in 2018

- Duration of DAPT Time For a "Tailored Approach"
- Atrial Fibrillation and PCI
 - Chronic Atrial Fibrillation on Warfarin & Undergoes A PCI?
 - Post PCI Patient Who Develops Atrial Fibrillation Which NOAC, What Dose?
- Emerging Role of NOAC'S With Stable CAD & Sinus Rhythm Which One & What Dose?

Learning Track: Lipids – "Year in Review"

0900 – 0930 Jacques Genest, MD

Lipid Management In My Patient With Atherosclerotic Heart Disease

- What is LDL target this year... or "lowest is best?"
- "My muscles ache" My approach to statin intolerance {Ezitimibe, bile acid sequestrants, fibric acid}
- PCSK9 Inhibitors what the trials taught us and the remaining gaps in the evidence

Learning Track: Women & Heart Disease

0930 – 1000 Sharon Mulvagh, MD

"Doctor, What Happened To Me?" - ACS In Young Women

- MI With No Obstructive CAD {"MINOCA"}
- Spontaneous Coronary Artery Dissection {"SCAD"}
- Stress Induced Cardiomyopathy

1000 - 1030

Nutrition Break - Please visit our exhibitors in the Light Court.

1030 – 1050	vention & Stable CAD Prevention of Cardiac Events in My CAD Patient		
Paul Oh, MD	 The "New Kid On The Block" – High Intensity Interval Exercise Training Transforming Cardiac Rehab: Technology Innovations and Wearable Devices – Do They Work? 		
	 "An Under-Filled Prescription" – Exercise Your Way To "Angina Reduction" 		
	 Why does it seem all my middle-aged athletes have atrial fibrillation? 		
1050 – 1120 Yoni Freedhoff, MD	Diet and Cardiovascular Disease: "Hot Topics" in Nutrition 1. What's a greater evil, sugar, or artificial sweeteners? 2. How many eggs or burgers can I eat without risking death? 3. Is milk a magic fairy food than confers bones of steel and unicorn strength? 4. What is the world's best diet? 5. What 8 easy to remember things can I do if I want to never again adjust my diet/life that will still afford me a healthier lifestyle than at least >95% of the population.		
Learning Track: Issu	es in Anticoagulation		
1120 – 1150	Challenges in Anticoagulation Management		
Sean Connors, MD	 CHADS 1 and Low Risk Patient for Stroke – Does Anticoagulation Lower Risk? Are there any REAL differences in NOAC's? Chronic Renal Failure {Creatinine 200-400} & Those On Dialysis – Need to Anticoagulate? Device Detected AF – Anticoagulate or Ignore? Cryptogenic Stroke with Sinus Rhythm – Any Role for Wearable Devices, Loop Recorder & Anticoagulation? 		
Learning Track: Con	troversies in Hypertension Management		
1150 – 1220 Simon Jackson, MD	 BP Measurement & Treatment in 2018 – "The Saga Continues!" a. Reclassification of "High Blood Pressure" b. What Device & What Location - Office, Home, or Out-and-About? c. Fluctuating Numbers – "What Should I Do?" d. "Beyond one size fits all approach" – BP Management Should Be Guided by ASCVD Risk e. "Guidelines Don't Apply to My Elderly Patients!" – Ups But Mostly Downs to BI Goals 		
Learning Track: Dial	petes – Moving Beyond A1C to CV Risk Reduction		
1220 – 1250 Nick Giacomantonio, MD	Actually Preventing CV Events – What Works, What Does Not? Stop Doing Chemstrips and Use HbA1c Only? GLP-1 Agonists & SGLT-2 Inhibitors for the Prevention and Treatment of Cardiovascular Disease A Practical Approach to Managing My CV Patient with T2D In 2018		
1250 – 1300	Questions and Answers/Closing Remarks		

Please note that 25% question/answer time is included in each lecture/presentation time allotment.

"Grab & Go" - Bagged lunch in the Light Court to take with you.

1300

Faculty

Beth Abramson, MD MSc FRCP FACC

Kim Anderson, MD FRCPC

Monique Babineau, RD

Colin Barry, MD FRCPC FACC

Arsène Basmadjian, MD MSc FRCPC FACC

Patrick C Bergin, MD FRCPC FACP

David Bewick, MD FRCPC FACC FACP

Denis Bouchard, MD CM MSc PhD FRCS(C)

Ronald Bourgeois, MD MSc FRCPC

lan G. Burwash, MD FRCPC

Kwan-Leung Chan MD FRCPC FAHA FACC

Chi-Ming Chow MDCM MSc FRCPC FCCS FASE

Kim Connelly, FRACP PhD MBBS

Sean P Connors, MD DPhil FRCPC

Michel D'Astous, MD FRCPC

Sabe De, MD FRCPC FASE

Susan Fagan, MD FRCPC

Darren Ferguson, MD FRCPC RVT

Yoni Freedhoff, MD CCFP Dip ABOM

Jacques J.G. Genest, Jr.MD FRCPC

Nicholas B. Giacomantonio, MD FRCPC

Milan Gupta, MD FRCPC FCCS FACC

Karen Harkness RN PhD CCN(C) CHFN-K

Stephen Hull, MD MRCP(UK)

Simon D Jackson, MD MMed Ed FRCPC

Kristina Kemp, MD FRCPC

Janet Krantz, PhD L Psych

Dayna Lee-Baggley, PhD R Psych

Jean-François Légaré, MD MSc FRCSC

Howard M Leong-Poi, MD FRCPC FASE FACC

Sohrab Lutchmedial, BA MDCM FRCPC

Paul MacDonald, MD FRCPC

Ciorsti MacIntyre, MD FRCPC

Martin MacKinnon, MD MSc FRCPC

David McFarlane, MBBS

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Jason Michalakos, BSc RDCS

Jeff Moore, MD FRCPC

Sue Morris, RN BN MEd CNCC(C) CCNC

Sharon Mulvagh, MD FRCPC

J. Stephen Mundle, MS BSc PT B PE

Shelley Nairn, RN CNeph(c)

Paul Oh, MD MSc FRCPC FACP

Frederic Paulin, MD FRCPC

Masis Perk, MD FRCPC

Andrew L Pipe, CM MD

Sarah Ramer, MD FRCPC

Josep Rodés-Cabau, MD

Barry Rose, MD FRCPC FACC

Anthony J Sanfilippo, MD FRCP(C) FACC

John L Sapp, MD FRCPC FHRS

Christopher Simpson MD FRCPC FACC FHRS FCAHS

Robert S Stevenson, MD CCFP FRCPC

Dinesh Thavendiranathan MD MSc SM FRCPC FASE

Satish Toal, MD

Samuel Wang, MD FRCPC

Duncan Webster, MA MD FRCPC

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Gregory Searles, MD FRCPC
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Julie Vicente, RDCS CRCS

DISCLOSURE OF POTENTIAL CONFLICTS OF INTEREST

In keeping with accreditation guidelines, committee members and faculty participating in this event have been asked to disclose to the audience any involvement with industry or other organizations that may potentially influence the presentation of the educational material.

CME CREDIT

CME application forms will be included in your registration package when you arrive at the **conference**. After the conference, confirmation of educational credit will be provided four to six weeks after we receive your **completed CME Application Form**, and will only be given for those sessions for which you have registered and attended.

ACCOMMODATIONS

Please reserve rooms directly with the hotel prior to the reservation deadline:

Delta Saint John

39 King Street Saint John, NB E2L 4W3

Tel: (506) 648-1981 or (888) 236-2427

By August 20, 2018:

(Ask for NB Heart Centre Symposium block.) Rooms: \$155 + taxes

Château Saint John

369 Rockland Road Saint John, NB E2K 3W3

Tel: (506) 644-4444 or (877) 772-4040

By August 10, 2018:

(Ask for NB Heart Centre Symposium block.) Rooms: \$129.99 + taxes (includes breakfast)

TRANSPORTATION

Please use the shuttle service.

Vehicle Parking Passes Are Not Provided.

Check hotel/hospital lobbies for schedule updates.

	Time	From	То
	0700 – 0845	Delta/Château SJ	Regional Hospital
THURSDAY	1115 – 1330	Regional Hospital	Delta/Château SJ and return
INUKSDAT	1500 – 1700	Regional Hospital	Delta/Château SJ
	1700 – 1815	Château SJ	Delta
	2100 – 2300	Delta	Château SJ
FRIDAY	0700 – 0900	Delta/Château SJ	Regional Hospital
	1130 – 1330	Regional Hospital	Delta/Château SJ and return
	1500 – 1730	Regional Hospital	Delta /Château SJ
	1700 – 1815	Château SJ	Delta
	2100 – 2300	Delta	Château SJ
SATURDAY	0700 – 1300	Delta/Château SJ	Regional Hospital and return

Space for	all sessions	is limite	d, so registe	r early	Pre-R	egister U	lp To Sep	tember 12
□Dr □Mr □	☐Ms ☐Mrs ☐Pro	of 🗖 Resider	nt / Student 🔲 Sono	grapher				
First Name:			Last Nam	e:				
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ONLINE a	t <u>http://sjrhf.ca/nb</u> ł	nc-symposiun	n_or by completing	the form	below a	nd selecti	ing the ap	
box(es). Send <u>:</u> HorizonNB.ca	-	rm via fax 50	6.648.6232 or scan	it and en	nail to <u>B</u>	renda.M	cNamara@	<u> </u>
		oncurrently	, please select on	ly one o	of the c	oncurre	nt sessio	ns.
Thursday Sept 20		8:00 – 12:00 ☐ Device/Arrhythmia ☐ Sonographers Workshop			1:00 – 4:00			
	Amphitheatre 1D			L	☐ ECG Workshop			
	Amphitheatre 5D			N	☐ Stress Echocardiography			•
	Classroom 5D	☐ CV Health Wellness & Rehabilitation		С	CV Health Wellness & Rehabilitation			
	Cafeteria AB	☐ CV Health						
	ARY FOR <u>THURSDAY</u>	<u>″S</u> SYMPOSIUI	llenges in Cardiology M ATTENDEES ONLY- end supper □ Guest revention	– PLEASE	50)		YOU PLAN	
Friday Sept 21	Amphitheatre 5D	☐ Current Co	U N C	☐ Current Concepts in Echocardiography				
	Classroom 5D	☐ Cardiovascular Nursing			□ NB Heart Resident Trainee			
		YMPOSIUM A	art Centre Gala ITENDEES ONLY – PL supper. □ Guest (1 onl		ЕСК ВОХ	(ES) IF YO	U PLAN TC	ATTEND/
Saturday Sept 22	Amphitheatre 1D				BAGGED LUNCH – GRAB & GO!			
The following re evening's sessio	gistration fees incluc n and the Friday eve	le all program ning gala will ii	nounts are payable to materials, refreshmen nclude complimentary	ts during o			and lunch.	Thursday
□ ONLINE by visiting http://sjrhf.ca/nbhc-symposium □ BY MAIL: Cheque or Money Order				3-Day	2-Day	1-Day	Thurs Evening Only	Subtotals
☐ IN PERSON: Cash, Cheque, Credit or Debit Card			Physician	400	350	300	50	
(Monday – Friday 8:30 a.m. – 4:00 p.m.) PLEASE INCLUDE THIS FORM WHEN SENDING PAYMENT			Other Health Professional	275	225	180	50	
	<u>'MENT</u> tre Symposium Payr		Thurs Evening Guest (1 only) – add \$50					
c/o SJRH Foun Saint John Reg	dation Office, Level 1 ional Hospital		Fri Evening Guest (1 only) – add \$75					
PO Box 2100, Saint John, NB E2L 4L2 Telephone: 506.648.6400 TOTAL AMOUNT							MOUNT:	

CANCELLATION FEE: If you cancel, your registration fee will be refunded minus a \$50.00 processing fee.



NB Heart Centre 2018 Cardiovascular Symposium
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