

Title: Hospitalists on the Frontline: Preventing and Managing Thromboembolic Events

Dates: March 31, 2015

Locations: National Harbor, MD

Learning Objectives:

- Identify the pathophysiology and risk factors for nonvalvular atrial fibrillation (NVAf), and stroke risk in the NVAf population
- Describe venous thromboembolism (VTE) pathophysiology, risk assessment, and the importance of prophylaxis and treatment
- Evaluate the pharmacologic differences among available oral anticoagulants (OACs) using efficacy and safety data

Target Audience: This activity has been designed to address the educational needs of physicians specializing in hospital medicine and internal medicine in the hospital setting. This activity will also benefit other health care professionals interested in the management of thrombosis with oral anticoagulants (OACs).

Program Overview: The hospitalist's role in recognizing and diagnosing non-valvular atrial fibrillation (NVAf) and venous thromboembolism (VTE); assessing stroke risk and prophylaxis need in hospitalized patients with NVAf; risk assessment and prophylaxis need in hospitalized patients at risk for VTE; pharmacological differences and safety data on available oral anticoagulants (OACs); strategies for managing bleeding complications; choosing appropriate OAC therapy based on patient characteristics.

There is a critical need for stroke prevention in the U.S., as it is the nation's fourth leading cause of death, and it is the leading cause of long-term serious disability. Among Medicare patients discharged from hospital after a stroke, about 55% are discharged to a rehabilitation or nursing facility. Of the ~45% discharged home, 32% require home healthcare services. Direct and indirect costs of stroke in 2010 were estimated at \$36.5 billion. It is important to note that stroke severity and associated short- and long-term mortality are more severe among patients with NVAf-related stroke than other stroke types.

There is a clear need among hospitalists for educational efforts that address stroke prevention in at risk patients with NVAf and the prevention and treatment of VTE, as well as education on the differences and use of existing and emerging OACs.

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