

To obtain CME credit for the Seventeenth Symposium on Cardiac Arrhythmias, 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 and evaluation questions below. A grade of 80% must be attained to receive CME credit.
- Complete a brief evaluation.
- Claim your CME credit by mailing the completed assessment and evaluation to the THI CME Office:
6770 Bertner Ave., MC 3-276; Houston, TX 77030
- The THI CME Office will grade the assessment, and, 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 provided.

Evaluation/Feedback

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

Assessment Questions

- Which of the following is true regarding subcutaneous ICDs and patients with congenital heart disease, hypertrophy, and channelopathy in the EFFORTLESS registry published in 2014?
 - Hypertrophic cardiomyopathy patients were ineligible because of high-amplitude T-wave exclusion.
 - Less than 10% of overall patients enrolled had congenital heart disease.
 - Channelopathy patients represented the majority of patients registered.
 - Patients from the United States were enrolled in the EFFORTLESS registry 2014.
 - Over 90% of patients in the EFFORTLESS registry received β -blockade.
- Freedom from ventricular tachycardia (VT) at one year after VT ablation is associated with improved survival in all NYHA functional class patients, with the greatest benefit in NYHA classes I and II.
 - True
 - False
- What does the electrocardiogram (right) show?
 - Normal dual-chamber behavior
 - Atrial undersensing
 - Ventricular undersensing
 - Ventricular noncapture
- In reference to the EFFICAS II study, what are the optimal contact force (CF) and minimum force–time integral (FTI) to improve pulmonary vein isolation durability?
 - CF 20 g and FTI 200 gs
 - CF 40 g and FTI 400 gs
 - CF 20 g and FTI 400 gs
 - CF 40 g and FTI 200 gs
- In reference to the pathways of drug elimination, the pharmacokinetics of which NOACs will be affected more by impaired renal function?
 - Dabigatran etexilate
 - Rivaroxaban
 - Apixaban
 - Edoxaban



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 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 and/or idea you gained from the section that will be useful to your care of patients.

Comments _____

Print your name _____ Signature _____

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