

Reducing Heart Failure Readmissions Update: Case Studies Utilizing Biomarkers for Risk Stratification

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Maximum Credit Hours: 1.0 hours

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Select one answer for each of the following questions.

1. Which of the following statements are true?

- a. Heart failure (HF) is one of the most rapidly increasing cardiovascular events.
- b. HF is the leading cause of hospitalizations for patients < 65 years of age.
- c. HF is the 4th leading cause of hospitalization in the U.S.
- d. All of the above.

2. Which of the following statements is true regarding the Centers for Medicare and Medicaid Services (CMS) readmission penalties?

- a. Approximately 2200 hospitals will be reimbursed from CMS for unnecessary fines.
- b. Approximately 2200 hospitals will lose up to 2% of Medicare reimbursements.
- c. Approximately 290 hospitals were fined in FY2012.
- d. Approximately 20 hospitals received the maximum CMS penalty of 5% in FY2013.

3. Which of the following statements is true regarding risk assessment in cardiovascular (CV) patients?

- a. Hematocrit at discharge is part of the risk assessment.
- b. Discharge from hematology is part of the risk assessment.
- c. Admission in the last 24 months is part of the risk assessment.
- d. Hospital risk prediction model is part of the risk assessment.

4. Which of the following is NOT a strategy that has been associated with lower 30-day HF readmission rates?

- a. Partnering with local hospitals and community physicians.
- b. Having physicians responsible for medication reconciliation.
- c. Arranging for follow-up visits before discharge.
- d. Assigning staff to follow-up on test results after the patient is discharged.

5. Which of the following is not a true statement based on the 2013 ACCF/AHA Guidelines?

- a. Markers of myocardial fibrosis are predictive of hospitalization in HF patients.
- b. Markers of myocardial fibrosis are predictive of death in HF patients.
- c. Markers of myocardial fibrosis are additive to natriuretic peptide levels in their diagnostic value.
- d. Markers of myocardial fibrosis include ST2 and Gal-3.

6. Which of the following is true about biomarkers and HF readmission rates?

- a. Biomarkers may predict which patients are at increased risk for readmission.
- b. Biomarkers do not predict which patients are at increased risk for readmission.
- c. Biomarkers must be monitored serially before being useful for readmissions.
- d. Biomarkers must be monitored early before being useful for readmissions.

7. Which of the following is true in regards to all-cause mortality versus CV mortality?

- a. ST2 is dependently associated with all-cause and CV mortality.
- b. Incorporation of ST2 into a full-adjusted model for all-cause mortality reclassified better.
- c. Incorporation of Gal-3 showed significant increase in reclassification in a full-adjusted model for all-cause mortality.
- d. Gal-3 had better calibration metrics in all-cause mortality.

8. Elevated concentrations of sST2 were found to be associated with HF severity.

- a. True.
- b. False.

9. Elevated levels of sST2 may be predictive of

- a. Classification of HF.
- b. Severity of complications.
- c. Onset of myocardial infarction in HF patients.
- d. Future risk of HF, CV disease, and mortality.

10. A change in ST2 shows a stronger relationship with outcome than baseline or changes in natriuretic peptides.

a. True.

b. False.

11. In serial testing with ST2, there are no differences with

a. Age.

b. Gender.

c. Weight.

d. All of the above.

Course Evaluation

Using the subsequent scale, please answer the following evaluation questions:

5 = strongly agree 4 = agree 3 = uncertain 2 = disagree 1 = strongly disagree

_____ The presentation was clear and to the point.

_____ The program met my educational objectives.

_____ The speakers provided information that will be useful in my practice.

_____ The supportive instructional materials were suitable and appropriate.

_____ The program was free of commercial bias.

Please provide input as to the most useful information shared and any suggestions regarding future topics of interest:

Comments:
