FIFTH ANNUAL STRUCTURAL HEART DISEASE: AORTIC VALVE AND BEYOND
May 19, 2017

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<th>Lakshmi Prasad Dasi</th>
<th>Galena Dimitrova, MD</th>
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<td>Jennifer Dollery, RN</td>
<td>Kasey Fiorini, MD</td>
<td>Antolin Flores, MD</td>
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<td>Manoj Iyer, MD</td>
<td>Scott Lilly, MD</td>
<td>William Perez, MD</td>
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<td>Gregory Rushing, MD</td>
<td>Bryan Whitson, MD</td>
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OBJECTIVES

AT THE CONCLUSION OF THIS ACTIVITY, PARTICIPANTS SHOULD BE ABLE TO:

1. Understand relative merits of surgical mitral valve repair and replacement as well as current percutaneous options, and appropriate candidates for each.

2. Acknowledge and understand challenges of transcatheter aortic valve replacement (AVR) in lower risk patients, and how these challenges differ from those at intermediate or high surgical risk.

3. Identify anatomical and procedural characteristics that favor transcatheter or surgical AVR, monitored or general anesthesia, and how these features occasionally drive off-label transcatheter AVR.

4. Review procedural therapies for mitigation of stroke risk in patients with atrial fibrillation, appropriate candidates, and relative effectiveness of surgical versus percutaneous left atrial appendage exclusion.

5. Review the necessary echo views and findings in order to accurately ascertain the degree of aortic stenosis, as well as guide procedural TAVR, MitraClip, and paravalvular leak closure.

6. Understand the rationale behind patent foramen ovale (PFO) closure in cryptogenic stroke, related outcomes, and limitations of historical studies.

7. Review the indications, anticipated benefits, and procedural outcomes associated with tricuspid valve interventions, along with current and forthcoming percutaneous options.

8. Review novel devices for diastolic heart failure, appropriate candidates for evaluation, and early clinical trial results.

COMMERCIAL SUPPORT

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