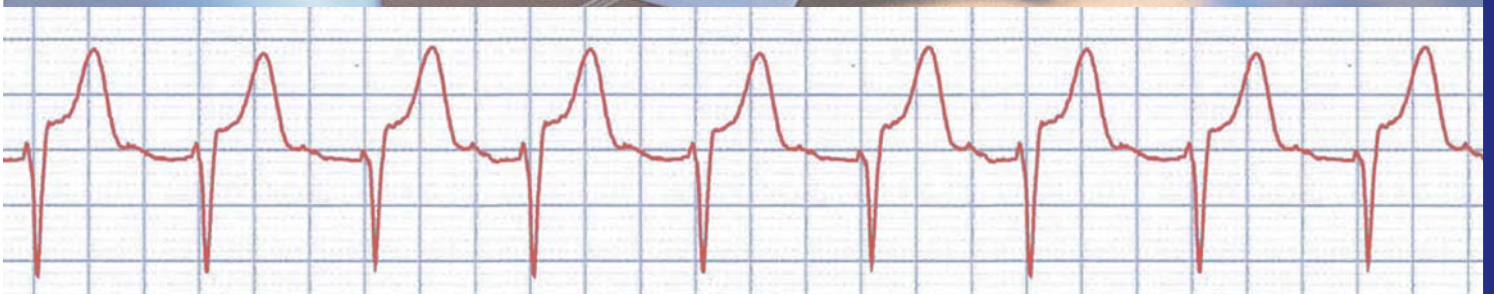


TIME IS MUSCLE TREATING AMIs – STAT!

ACUTE MYOCARDIAL INFARCTION (AMI) GUIDELINE DIDACTIC



SIMSUITE[®]
MEDICAL SIMULATION CORPORATION

TIME IS MUSCLE: TREATING AMIs – STAT!

Course Objectives

This online course is a flexible, self-paced learning module designed to enhance the participant's knowledge in the management of patients experiencing an Acute Myocardial Infarction (AMI). At the end of the course, the participant should be able to:

- Understand the signs and symptoms of Acute Coronary Syndrome (ACS).
- Understand the causes of ACS and identify patients who are at high risk.
- Be able to differentiate among the various types of Myocardial Infarctions (MI).
- Be able to utilize an electrocardiogram (ECG) and lab results to diagnose MIs.
- Have a working knowledge of possible complications and treatment options.
- Successfully complete a review exam.

Target Audience

This course is suitable for healthcare professionals in the following areas:

- Emergency Room
- Coronary Care Unit
- Cardiac Catheterization Lab
- Interventional Lab
- Intensive Care Unit
- Coronary Step-down
- Cardiac/Telemetry
- General Medicine

Course Features

This comprehensive course provides detailed information on Acute Myocardial Infarctions (AMI) in the following areas:

- Definition and characteristics of AMIs based on the American College of Cardiology (ACC) and the European Society of Cardiology (ESC)
- Epidemiology
- Pathophysiology
- Risk factors and risk assessment
- Determining patient prognosis
- Clinical presentation
- Differential diagnosis
- Diagnosis
 - ♦ 12-lead ECG interpretation
 - ♦ Laboratory findings
- Acute phase treatment and complications
- Secondary treatment, complications, and long-term management

Benefits

- Online convenience and flexibility: available anytime, anywhere
- Self-paced learning
- Consistent training
- Final exam to ensure learning objectives were met
- Integration into Quality Improvement Programs

Clinical Applicability

Each year, more than a million people in the U.S. have a heart attack and about half (515,000) of them die.¹ Heart attacks, or Acute Myocardial Infarctions (AMIs), occur when the supply of blood and oxygen to an area of the heart muscle is blocked, typically by a clot in a coronary artery. Coronary artery disease is the number one killer in America. It's no wonder that management of AMIs has become a central focus for many hospitals across the country. The Joint Commission and the Centers for Medicare and Medicaid Services (CMS) have both identified AMI as an important area for improvement in hospitals. Both organizations have included AMI as a diagnosis for which participating hospitals must collect and report data on quality measures.

The key quality indicators that are being closely scrutinized by CMS and other organizations include administering aspirin to the patient within 24 hours of admittance to a hospital (national median 84%); administering a beta blocker to a patient within 24 hours of admittance to a hospital (national median 64%); prescribing a beta blocker when a patient is discharged (national median 72%); prescribing ACE inhibitors for patients with decreased left ventricular ejection fraction (national median 71%); providing smoking cessation counseling to patients in the hospital (national median 40%); length of time before a patient receives angioplasty in minutes (national median 120 minutes); and length of time before a patient receives thrombolytic therapy in minutes (national median 40 minutes). A recent study demonstrated that hospital adherence to national guidelines for treating patients with potential heart attacks saves lives.² Specifically, hospitals that were the best at following the treatments recommended by the American College of Cardiology (ACC) and the American Heart Association (AHA) had a mortality rate of 4.15 percent, compared with a 6.31 percent mortality rate for hospitals that were the worst at following guidelines.²

References:

¹www.nih.gov

²Merritt, R. Heart attack patients do better at hospitals following guidelines. Press Release. www.dukemednews.org/news/article. April, 2003.

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