



JOHNS HOPKINS
M E D I C I N E

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Johns Hopkins Myocardial CT Perfusion Practicum

DATED MATERIAL

September 14-16, 2017



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Organization Code: **HopkinsCME**

<https://hopkinscme.cloud-cme.com/aph.aspx?t=5&EID=10642>

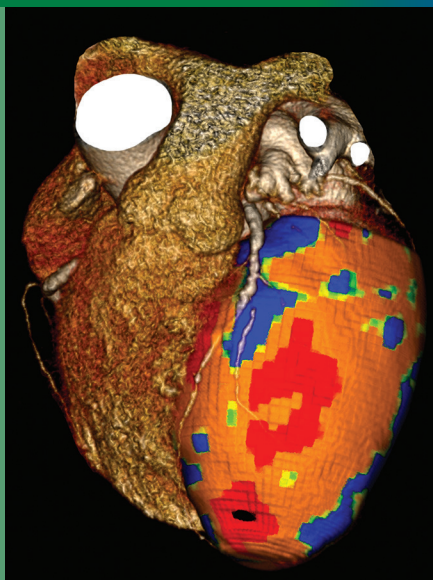
Johns Hopkins University School of Medicine
Division of Cardiology

Presents:

Johns Hopkins

Myocardial CT Perfusion Practicum:

*From
Anatomy
to
Physiology*



September 14-16, 2017

Activity Director: João A.C. Lima, MD

This activity has been approved for *AMA PRA Category 1 Credits™*.



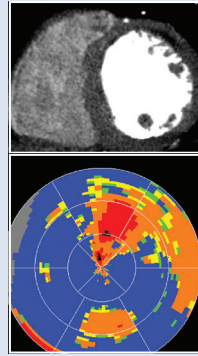
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MEDICINE

Description

Myocardial CT perfusion imaging is a diagnostic test for patients with suspicion of coronary artery disease (CAD). Recent single and multicenter studies have validated its accuracy and billing/coding guidelines have recently been released by invested medical societies (ACC, ACR, SCCT). However, adoption requires training of cardiologists and radiologists in test performance and interpretation.

This activity is held at the Johns Hopkins Bayview Medical Center in Baltimore, Maryland, in a multimedia classroom constructed specifically for the learner's needs. This is a workstation-based training activity that aims to train participants in the performance and interpretation of rest and stress myocardial CT perfusion imaging. This is in conjunction with the coronary CT angiograms with correlations to radionuclide myocardial perfusion imaging and invasive coronary angiograms. This will be accomplished during a three day course that includes didactic lectures and hands on training.

Each participant has their own workstation to use throughout the activity with personal interaction with course faculty. The workstation is designed to assist the user in the interpretation of coronary CT angiography in conjunction with rest and stress myocardial CT perfusion imaging. Participants will be trained in the use of the workstation and then will train on a library of coronary and myocardial CT images. At the completion of the course, participants will have interpreted more than 50 coronary CT angiograms and myocardial CT perfusion cases with comparisons to clinical reference standards including invasive angiography, SPECT myocardial perfusion imaging, and FFR. At the completion of training, participants will be provided a certificate documenting completion of the course and the number of cases interpreted.



Who Should Attend

This activity is intended for Cardiologists, Radiologists and Technologists who are currently in practice or are in a fellowship seeking training in the performance and interpretation myocardial CT perfusion images.

While Level II experience in coronary CTA is not required as a prerequisite for the course, it is highly recommended. Coronary CT angiograms will be reviewed throughout the course, but the course will not focus on training in the evaluation of Coronary CTA. It will be assumed that the student will have the skills required to read coronary CTA. Participants may use the course to continue training toward Level III training in coronary CTA.

Objectives

After attending this activity, the participant will demonstrate the ability to:

- Recognize the indications and contraindications of CT perfusion imaging.
- Perform myocardial CT perfusion imaging.
- Reconstruct and process myocardial CT imaging datasets.
- Interpret myocardial CT perfusion images.
- Recognize CT imaging artifacts that can confound the interpretation of myocardial CT perfusion images.
- Integrate coronary artery anatomical data with myocardial physiologic data.
- Interpret CT perfusion studies.

Accreditation Statement

The Johns Hopkins University School of Medicine is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.



Credit Designation Statement

The Johns Hopkins University School of Medicine designates this live activity for a maximum of 22 *AMA PRA Category 1 Credits*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

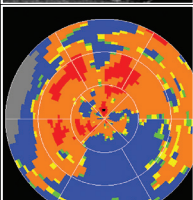
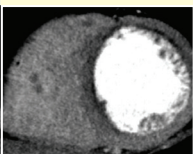
Other Credit

American Healthcare Radiology Administrators

This activity has been approved by AHRA, the approving RCEEM: The Association for Medical Imaging Management for a maximum of 4 Category A, ARRT continuing education credits. *You must attend each session in its entirety to obtain credit. No partial session credit will be awarded.*

Policy On Speaker And Provider Disclosure

It is the policy of the Johns Hopkins University School of Medicine that the speaker and provider globally disclose conflicts of interest. The Johns Hopkins University School of Medicine OCME has established policies in place that will identify and resolve all conflicts of interest prior to this educational activity. Detailed disclosure will be made in the instructional materials.



General Information

LOCATION

Johns Hopkins Bayview Medical Center
Alpha Center, 3rd Floor Conference Room
5210 Alpha Commons Drive
Baltimore, MD 21224

Conveniently located off Interstate 895, the Johns Hopkins Bayview Medical Center is the site of the meeting. Directions to campus parking please visit our website to access this information, <https://hopkinscme.cloud-cme.com>. Handicapped parking is available. *Johns Hopkins is smoke-free.*

REGISTRATION

Registration is accepted on a first payment-received basis. Please call Kathleen Lensch at (410) 502-2052 or e-mail klensch@jhmi.edu to check availability and make your reservation.

September 14-16, 2017

Fees

REGISTRATION CUT-OFF DATE: SEPTEMBER 8, 2017

Register Online at:
<https://hopkinscme.cloud-cme.com/aph.aspx?P=5&EID=10519>

Methods of Payment:

We require full payment prior to the start of the activity. On-site payments by credit card only. The registration fee includes instructional materials, continental breakfasts, refreshment breaks and lunches.

Physicians \$3,900
Residents*/Fellows*/Technologists\$3,000
*with verification of status

You will receive a confirmation by e-mail. If you have not received it by **September 8, 2017**, call (410) 502-9634 to confirm that you are registered. A transcript of attendance will be available upon attestation of your credit hours and submission of the post activity online evaluation.

The Johns Hopkins University reserves the right to cancel or postpone any activity due to unforeseen circumstances. In this event, the University will refund the registration fee but is not responsible for travel expenses. Additionally, we reserve the right to change the venue to a comparable venue. Under such circumstances registrants will be notified as soon as possible.

Late Fee And Refund Policy

A \$50 late fee applies to registrations received after 5:00 p.m. ET on **September 8, 2017**. A handling fee of \$50 will be deducted for cancellation. An additional fee may apply for cancellation of other events, including workshops and social activities. Refund requests must be received by fax or mail by **September 8, 2017**. No refunds will be made thereafter. Transfer of registration to another Johns Hopkins activity in lieu of cancellation is not possible.

Syllabus

All registrants will receive a binder with the slides and paper for note taking. This is included in the cost of your registration.

Hotel & Travel Information

Participants are responsible for making their own travel and lodging arrangements. Please call Kathleen Lensch (410) 502-2052 for suggestions about hotels. As clustering of participants may allow us to arrange complimentary transportation to and from Johns Hopkins Bayview Medical Center each day.

Evaluation and Outcomes Survey

Post activity, an online evaluation form will be available to attendees to evaluate the activity and individual presentations and identify future educational needs. Upon completion of the evaluation, the learner must attest to the number of hours in attendance. Credits earned will be added to the learner's transcript and immediately available for print.

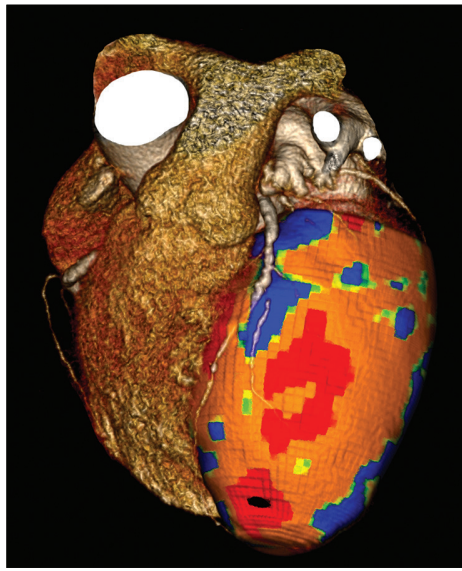
A survey will be sent to all physician attendees within three months post activity to assist us in determining what impact this activity had on the learner's practice.

Emergency Calls

On **September 14-16, 2017**, direct emergency calls to the Hopkins registration desk, (410) 955-3673. Messages will be posted for participants.

Americans With Disabilities Act

The Johns Hopkins University School of Medicine fully complies with the legal requirements of the ADA and the rules and regulations thereof. *Please notify us if you have any special needs.*



Why THIS Course?

- The only U.S. and University-based course currently available
- This activity is certified for CME credit and ARRT, Category A continuing education credits
- Continuous close supervision by and interaction with senior Johns Hopkins faculty
- One student per workstation
- All lectures by University faculty
- Faculty have extensive experience in myocardial CT perfusion imaging
- All cases have anatomic and/or physiologic correlations to clinical reference standards

TO REGISTER or FOR FURTHER INFORMATION

Register Online..... <https://hopkinscme.cloud-cme.com/aph.aspx?P=5&EID=10519>

Register by Phone..... (410) 502-9634

Register by Fax..... (866) 510-7088

Confirmation/Certificates/Transcripts..... (410) 502-9634

General Information..... (410) 955-2959

E-mail the Office of CME..... cmenet@jhmi.edu

Follow us on Twitter: <http://twitter.com/HopkinsCME>

Facebook: <http://www.facebook.com/HopkinsCME>

For general information, please visit the activity webpage at <https://hopkinscme.cloud-cme.com/aph.aspx?P=5&EID=10519>



NEW! Check out our mobile app CloudCME.
Organization Code: **HopkinsCME**
For website and CloudCME mobile app technical difficulties, email: cmetechnsupport@jhmi.edu

Schedule

	Day 1	Day 2	Day 3
8:00 am - 8:30 am	Continental Breakfast		
8:30 am - 10:00 am	Welcome and Introductions	Patient Prep and CTP Acquisition	Troubleshooting CTP Acquisition Parameters
	Basic Principles of Myocardial CTP	Hemodynamic Assessment of Multi-vessel Disease	Read with the Experts
	Stepwise Interpretation of CTP	Read with the Experts	
10:00 am - 10:15 am	Morning Break		
10:15 am - 12:30 pm	Mini-Topics		
	Workstation Introduction	Evaluation of In-Stent Restenosis	CTP in Non-Ischemic Cardiomyopathy
	Read with the Experts	Read with the Experts	Read with the Experts
12:30 pm - 1:30 pm	Lunch Break		
1:30 pm - 3:00 pm	Mini-Topics		
	Review of Pharmacologic Stress Agents	Myocardial Infarction and Viability	Assessment of Coronary Hemodynamics
	Read with the Experts	Read with the Experts	Read with the Experts
3:00 pm - 3:15 pm	Afternoon Break		
3:15 pm - 5:30 pm	Read with the Experts	Mini-Topics	Read with the Experts
		Myocardial Evaluation	
		Read with the Experts	
5:30 pm	Adjourn		

Didactics
 Hands-on Training

The Johns Hopkins School of Medicine takes responsibility for the content, quality and scientific integrity of this CME activity.

This schedule is subject to change.



Topics Covered in “Read with the Experts”:

- Normal Cases
- Mild to Moderate Disease
- Single Vessel Disease
- Artifact Focus
- Impact of Reconstruction
- Multivessel Disease
- Stents
- Prior MI - CTP
- Prior MI – Viability
- SPECT vs. CTP Discrepancies
- Anatomy vs. Physiology Discordance
- Sarcoid, ARVD, Amyloid, etc.
- Miscellaneous Cases

Activity Director

João A.C. Lima, MD

Professor of Medicine
Director of Outreach
Cardiovascular Imaging
Johns Hopkins University
School of Medicine

Guest Speakers

Marcus Chen, MD

Director, Cardiovascular CT
National Institute of Health
Bethesda, Maryland

Ravi Sharma, MD

4th Year Resident
Beth Israel Deaconess Medical Center
Boston, Massachusetts

Activity Co-Director

Armin A. Zadeh, MD, PhD

Associate Professor of Medicine
Associate Director of Cardiac CT
Department of Medicine,
Division of Cardiology
Johns Hopkins University
School of Medicine

Johns Hopkins Speakers

Michael Blaha, MD, MPH

Assistant Professor of Medicine
Director of Clinical Research
Johns Hopkins University
School of Medicine

Mohammad Ostovaneh, MD, MPH

Post Doctoral Research Fellow
Johns Hopkins University

Registration Form

Course Number 80040118/10519

Johns Hopkins Myocardial CT Perfusion Practicum: From Anatomy to Physiology

September 14-16, 2017

To Register: **Online:** <https://hopkinscme.cloud-cme.com/aph.aspx?P=5&EID=10519>

By fax: (866) 510-7088 **By phone:** (410) 502-9634

Or mail this form to the Johns Hopkins University, Office of Continuing Medical Education, 720 Rutland Avenue, Turner Room 20, Baltimore, Maryland 21205-2195. Include e-check or credit card information below.

FULL PAYMENT IS REQUIRED PRIOR TO THE START OF ACTIVITY.

I am a Johns Hopkins speaker for this activity.

Please type or print clearly:

last name		first name	m.i.	
highest degree	primary specialty		Hopkins faculty/staff only JHED ID	
For Physicians Only:	NPI – 10 digits	State License #		State of License
mailing address				
city		state	ZIP	country
daytime telephone		fax number		
e-mail (required field)				

Check here if you wish to receive e-mail notices about upcoming CME activities.

I plan to stay at the _____ in _____
Name of Hotel City, State

What do you hope to learn by attending this activity? _____

Please notify us if you have any special needs. _____

Registration Fees:

- Physicians.....\$3,900
 Residents*/Fellows*/Technologists.....\$3,000
 *with verification of status

The registration fee includes instructional materials and food and beverage. For registrations received after 5:00 p.m. ET on **September 8, 2017**, prior to activity starting date, include a \$50 late fee. On-site registrations are payable only by credit card.

Call Kathleen Lensch at (410) 502-2052 or email klensch@jhmi.edu for availability.

Payment Type:

Total amount \$ _____

JHU Faculty/Staff Only: If you are using your Tuition Remission Benefit or an ION budget, please upload your fully completed and approved form in the payment section of the online activity link above.

- TR Form: <http://benefits.jhu.edu/documents/trffacandstaff.pdf>
 ION Form: <http://hopkinscme.edu/migration/IonRequest.pdf>

e-Check: Routing Number: _____ Account Number: _____

Credit Card: VISA MASTERCARD DISCOVER AMEX

Card # _____ - _____ - _____ - _____ Exp. Date _____

Billing Zip Code _____ Security Code _____

Name on Card

Signature and Date