



## Session Learning Objectives

*CanMEDS Role Mapping*

### FRIDAY, JUNE 5

08:15–  
08:35

#### Conduction system pacing: ready for prime time?

*Ratika Parkash*

##### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to identify appropriate candidates for left bundle area pacing, describe the evidence supporting its use over conventional pacing and CRT, outline referral pathways to a tertiary centre, and anticipate potential procedural complications.

Medical Expert Scholar Communicator Health Advocate

08:45–  
09:05

#### ALONE in the OCEAN: do all patients post AF ablation still need long-term OAC?

*Amir Abdelwahab*

##### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to critically evaluate current evidence regarding OAC discontinuation after AF and atrial flutter ablation, apply risk-stratification principles to individual patients requesting OAC cessation, and formulate a management plan regarding antiplatelet therapy in this population.

Medical Expert Scholar Communicator

09:15–  
09:35

#### Is Plavix (clopidogrel) the "smart choice" for all patients with vascular disease requiring platelet monotherapy?

*Zardasht Oqab*

##### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to compare the pharmacological rationale and clinical evidence for clopidogrel versus ASA monotherapy in patients with established vascular disease and apply updated evidence to recommend an individualized antiplatelet strategy in clinical practice.

Medical Expert Scholar Communicator

10:15–  
10:35**The ROSS procedure for aortic stenosis: patient selection, long-term outcomes, and follow-up***David Horne***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to identify optimal surgical candidates for the ROSS procedure in younger patients with severe aortic valve disease, compare its short- and long-term outcomes with mechanical AVR, and describe the clinical follow-up expectations for this patient population.

**Medical Expert** **Scholar** **Collaborator** **Health Advocate**10:45–  
11:05**TAVI follow-up: what needs to be done?***Osama Elkhateeb***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to outline a structured post-TAVI follow-up plan for community physicians, define HALT and its clinical significance, determine when to re-refer to the TAVI team based on gradient findings, and apply appropriate antithrombotic and SBE prophylaxis guidelines after TAVI.

**Medical Expert** **Communicator** **Collaborator**11:15–  
11:45**POTS: what should the internist or cardiologist know?***Jeff Ratushny***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to diagnose POTS using clinical and investigative criteria, differentiate it from other causes of orthostatic symptoms, and implement a practical, individualized management strategy to reduce symptoms and improve patient quality of life.

**Medical Expert** **Scholar** **Communicator** **Health Advocate**13:00–  
13:20**Cardiogenic shock in the community: identification, management, and transfer decisions***Andrew Caddell***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to recognize and risk-stratify cardiogenic shock presentations in non-tertiary settings, select appropriate vasoactive agents and sequencing, and apply a framework for determining when and how to transfer patients for consideration of catheterization or mechanical circulatory support.

**Medical Expert** **Communicator** **Collaborator** **Health Advocate**13:30–  
13:50**When to suspect, and how to work up constrictive pericarditis***Sarah Ramer***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to identify clinical scenarios in which constrictive pericarditis should be considered, recognize key diagnostic features that distinguish true constriction from its mimics, and determine which patients warrant surgical referral versus a trial of medical therapy.

**Medical Expert** **Scholar** **Communicator**14:00–  
14:40**Heart failure with non-reduced ejection fraction in 2026: beyond SGLT2i***Kim Anderson***LEARNING OBJECTIVE**

By the end of this presentation, participants will be able to identify patients with HFpEF/HFmrEF, apply current CCS guideline recommendations including SGLT2 inhibitors, MRAs, and GLP-1 receptor agonists, and integrate weight reduction strategies into a comprehensive, individualized management plan.

**Medical Expert** **Scholar** **Health Advocate**

15:10–  
15:30

### Minimally invasive MV repair: a surgical overview

*Roberto Ribeiro*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to distinguish patients with structural mitral valve disease who are appropriate candidates for minimally invasive surgical repair, compare its advantages over conventional open surgery, and describe the referral pathway to access this procedure at the local centre.

**Medical Expert** **Collaborator** **Communicator**

15:40–  
16:00

### Mitraclip: patient identification, procedural concerns, and long-term outcome

*Doug Hayami*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to identify patients with severe mitral regurgitation who may be candidates for percutaneous MitraClip intervention, outline the pre-referral workup required, and anticipate long-term outcomes and future directions as percutaneous MV implant technology evolves.

**Medical Expert** **Scholar** **Communicator** **Health Advocate**

## SATURDAY, JUNE 6

08:10–  
08:30

### How to assess LVOT obstruction

*Andrew Grant*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to perform a technically accurate echocardiographic assessment of LVOT obstruction and SAM in patients with hypertrophic cardiomyopathy, recognize common pitfalls in quantification, and apply findings to guide candidacy assessment and monitoring for Mavacamten therapy.

**Medical Expert** **Scholar**

08:40–  
09:00

### When echo measurements are wrong: quantitative assessment of mitral regurgitation

*Doug Hayami*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to compare the strengths and limitations of EROA, vena contracta, and PISA methods for quantifying mitral regurgitation, recognize discordant or erroneous measurements in clinical cases, and determine when to integrate visual assessment alongside quantitative data.

**Medical Expert** **Scholar** **Communicator**

09:10–  
09:30

### When ECHO measurements are wrong: discordant findings in aortic stenosis

*Robbie Stewart*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to systematically evaluate aortic stenosis severity using an integrated approach, avoid common pitfalls leading to over- or under-diagnosis, and apply a diagnostic framework to resolve discordant findings including paradoxical low-flow, low-gradient AS.

**Medical Expert** **Scholar** **Communicator**

10:10–  
10:30

### Structured right heart assessment

*Dan Belliveau*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to perform a systematic, reproducible right heart echocardiographic assessment based on current ASE guidelines, select the most clinically useful measurements, and critically appraise the limitations of right heart parameters in their practice.

**Medical Expert** **Scholar**

10:40–  
11:00

### Contrast is great, but am I using it right?

*Sarah Ramer, Jan Ainslie*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to apply correct technical technique for ultrasound-enhancing agent use in LVEF assessment and LV thrombus detection, identify contraindications and patient safety considerations, and optimize contrast protocols in their echocardiography laboratory.

**Medical Expert** **Scholar** **Professional**

11:20–  
11:50

### Benchmark ECHO cases from Atlantic Canada

*Amy Hendricks, Sherief Kamel, Kyle Murnaghan*

#### LEARNING OBJECTIVE

By the end of this presentation, participants will be able to integrate echocardiographic findings with clinical context to resolve complex or ambiguous cardiovascular presentations drawn from regional practice and apply lessons from challenging cases to their own diagnostic and management decision-making.

**Medical Expert** **Scholar** **Communicator** **Collaborator**

#### CANMEDS ROLE LEGEND

**Medical Expert** **Scholar** **Communicator** **Health Advocate** **Collaborator** **Professional**