

## OUTLINE

### Hemodynamics and Shock

- Pre-load, afterload and contractility
- What about administering electrolytes to improve cardiac function?
- Fluids - which ones and how much?
- Vasoactive medications - do not ever mix these medications
- Neurotransmitters and receptors - more than alpha and beta receptors
- Case studies in patients with compromised cardiac output, ventricular fibrillation

### Antiarrhythmics

- Sodium, calcium and potassium blocking medications
- What can be given IV, PO, SQ, IO ... and how much
- Must know pearls for monitoring all the anti-arrhythmic medications
- Case studies in patients with atrial fibrillation, atrial flutter, ventricular tachycardia, PSVT

### SARS-CoV-2 and cardiac function

- Blood pressure management
- Angiotensin converting enzyme-2 (ACE-2) receptor and SARS-CoV-2
- Management of Post-Acute Sequelae of SARS-CoV-2 infection (PASC) or COVID-long haulers

### Medications for Acute Coronary Syndrome

- Aspirin - this is not a benign medication
- Medications to administer in the ED
- Medications for cardiac catheterization lab patients
- Watch out for contrast induced nephropathy - with laboratory parameters to monitor
- Medications to aid in smoking cessation
- Anticoagulants, anti-platelet and thrombolytic medications
- Case studies in STEMI and N-STEMI

### Heart Failure Pharmacology

- Not just ACEs and ARBs now - guideline updates for 2021
- Diuretics - demystifying what is the best diuretic for your patient
- New medication category for treatment of heart failure
- Case studies and medications in HFrEF and HFpEF

### What's New in Treatment of Hypertension - A Lot!

- Treatment options for primary or secondary hypertension
- Calcium channel blockers - what to do if your patient overdoses
- Beta-blockers - what criteria is considered to increase or decrease dose?
- Vasodilators - watch out for change in electrolytes when giving this medication
- Do not mix these anti-hypertensive medications

### How to Lower LDL and Raise HDL Cholesterol

- Familial versus non-familial hypercholesterolemia
- Statins and a whole lot more
- Latest monoclonal antibodies to manage cholesterol
- Case studies in patients with altered lipid levels

### Hypoglycemic Agents

- 9 major categories of hypoglycemic agents... and counting - which is best for my patient?
- Monitoring laboratory data - not just blood sugar now
- Latest recommendations from the American Diabetic Association
- Case studies with patients taking hypoglycemic agents

### Pregnancy and Cardiac Medications

- What medications are safe - up to which trimester
- Which cardiac medications to avoid regardless of the stage of pregnancy

### Live Seminar & Webinar Schedule

(Time listed in Eastern)

- 7:30** Registration/Morning Coffee & Tea
- 8:00** Program begins
- 11:50-1:00** Lunch (*on your own*)
- 4:00** Program ends

There will be two 15-min breaks (mid-morning & mid-afternoon). Actual lunch and break start times are at the discretion of the speaker. A more detailed schedule is available upon request.

## OBJECTIVES

1. Distinguish the need for cardiac medications and the need for electrolytes or fluids to improve cardiac output.
2. Analyze the anti-arrhythmic medications which would benefit your specific patient.
3. Plan a list of medications which a STEMI or NSTEMI patient would be expected to take.
4. Measure the therapeutic outcome of the STEMI or NSTEMI medications.
5. Manage the cardiac work-up and medications for patients with Post-Acute Sequelae of SARS-CoV-2 infection (PASC) or COVID-long haulers
6. Formulate a monitoring plan for your heart failure patient.
7. Differentiate medication options for patients with hypertension.
8. Distinguish between the cholesterol lowering medications.
9. Choose the best hypoglycemic agent based upon my patient's presentation and laboratory parameters.
10. Determine the cardiac medications the pregnant woman can and cannot take.

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# ADVANCED CARDIOVASCULAR PHARMACOLOGY COURSE

Taught by **Dr. Paul Langlois, APN, PhD, CCRN CCNS**



- Up-to-date prescription guidelines for cardiac medications
- Manage blood hypercoagulation in SARs-CoV-2
- Easily identify cardiac medication toxicity
- Proven solutions for patient medication compliance
- Electrophysiology of cardiac medications totally demystified
- Over-the-counter medications for patients to avoid
- Includes 6.3 pharmacology contact hours!



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# Advanced Cardiovascular Pharmacology Course

Now more than ever, clinicians are challenged to prescribe the proper medications to treat various – and often complex - cardiovascular diagnoses.

Dr. Paul Langlois, APN, PhD, CCRN CCNS, has developed this intense one-day educational event to **improve your patients' responses to their cardiac medication regimens**. You will immediately elevate your pharmacological expertise and earn up to **6.3 pharmacology CE hours!**

Regardless of your setting, **you must be prepared to manage cardiac conditions and prevent a cardiac emergency**. Dr. Langlois will provide practical tools and tips that will make your job easier. He understands that you could literally spend hours every day researching novel and traditional cardiac medications; their indications, contraindications, drug interactions and evaluation of response to the treatments. Instead **allow Dr. Langlois to synthesize everything you need to know to safely and effectively manage your cardiac patients** with skill and confidence.

You can expect the very latest pharmacological strategies for **Antiarrhythmics, Anticoagulants, Anti-platelet and Thrombolytics, Antihypertensives, Cholesterol Lowering Drugs, Hypoglycemic Agents...**and more!

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"The teacher did a great job of teaching and his enthusiasm came through!" Pascale, PA



"The course was extremely educational. Very useful in our clinical setting." Celina, Med/Surg RN



"Speaker is phenomenal. His understanding of the topic matter is fantastic and he is able to present it in a very interesting and understandable manner." Jen, NP



"Great content! Learned a lot." Pauline, Critical Care RN

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## MEET YOUR SPEAKER

**Dr. Paul Langlois, APN, Ph.D., CCRN, CCNS, CNRN**, is currently a critical care clinical specialist in the Surgical, Medical, Neurologic, Burn, CCU and Trauma ICUs of Cook County Hospital, Chicago. As a bedside clinical nurse specialist, he has developed several institution-wide protocols for the multidisciplinary assessment and management of the cardiac, neurologic, septic, and multi-system organ failure patient. Drawing on over 30 years of experience assessing and managing patients with life-threatening diseases, Paul provides advanced-level training to nurses, physician assistants, nurse practitioners and physicians. Paul's presentations are evidence-based, timely and provide participants with case studies to facilitate critical thinking.

### Speaker Disclosure:

Financial: Paul Langlois has an employment relationship with Cook County Hospital. He receives a speaking honorarium from PESI, Inc.

Non-financial: Paul Langlois has no relevant nonfinancial relationship to disclose.



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### Target Audience:

Nurses • Nurse Practitioners • Clinical Nurse Specialists • Physician Assistants  
Cardiovascular Technologists • Pharmacists

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