

## Abstract 2

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### **Background:**

There are over 2 million people in the United States in atrial fibrillation (AF) with the incidence projected to rise. AF greatly increases the risk for stroke. We began our journey to become an AF certified center to improve stroke prevention through use of risk stratification, anticoagulation and medication education.

### **Methods:**

We began by establishing AF as an agenda item at the monthly Cardiovascular Section meeting. House wide education focused heavily on CHADS2-Vasc risk stratification to assure appropriate anticoagulation. Additional strategies included early detection and bleeding assessment. A teach back tool on AF was developed to educate on disease specific care and foster consistency. Articles on AF and stroke were published for the community. Strong collaboration between Emergency Medical Services and the Emergency Department assisted with process development. Multiple grand round sessions were offered by Cardiology and Electrophysiology. Finally, a multidisciplinary bridging committee was assembled to focus on prevention of thromboembolic complications caused by stopping anticoagulation prior to elective surgery.

### **Results:**

Performance of CHADS2-Vasc risk assessment rose from 20% in 2014 to 100% in 2015. Use of anticoagulation rose from 55 % in 2014 to 80-100% in 2015. Completion of anticoagulation medication education rose from 20% in 2014 to 50-65% in 2015. Finally, a bridging algorithm was developed along with a pre-surgery screening tool to identify patients at risk for stroke due to interruption of anticoagulation.

### **Conclusion:**

Successful certification as an AF center occurred in August of 2015. Continued collaboration with EMS, the community, physicians and pharmacists assists in prevention of AF complications and enhances quality of life. Emphasis on safety for patients undergoing elective surgery who require interruption of anticoagulation now occurs regularly through early screening and referral to pharmacy. Successful certification as an AF center occurred in August of 2015. Continued collaboration with EMS, the community, physicians and pharmacists assists in prevention of AF complications and enhances quality of life. Emphasis on safety for patients undergoing elective surgery who require interruption of anticoagulation now occurs regularly through early screening and referral to pharmacy.