2020

Get in Rhythm. Stay in Rhythm.®
Virtual Atrial Fibrillation Patient Conference

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PATRON SPONSORS

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OCTOBER 30 - NOVEMBER 1, 2020
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StopAfib.org is a non-profit patient advocacy organization that is focused on educating and supporting those living with atrial fibrillation (afib). The organization was founded in April of 2007 by Mellanie True Hills, an atrial fibrillation survivor.

The mission of StopAfib.org is to raise awareness of atrial fibrillation, improve patient quality of life, bridge the communication gap between patients and their healthcare providers, and rid the world of afib-related strokes.

For more information and additional resources, please visit https://www.stopafib.org.

StopAfib.org Patient Resources

- Get Started Learning About Atrial Fibrillation Guide:
  https://www.stopafib.org/newsitem.cfm/NEWSID/277

- Afib News and Videos:
  https://www.stopafib.org/news.cfm

- Patient & Caregiver Resources:
  https://www.stopafib.org/resources.cfm

- Glossary:
  https://www.stopafib.org/downloads/glossary.cfm

- Afib Services Locator:
  https://www.stopafib.org/find.cfm

- Patient Discussion Forum:
  https://forum.stopafib.org

- Atrial Fibrillation Blog:
  https://www.atrialfibrillationblog.com

- StopAfib Video Library featuring videos of webinars, master classes, and past patient conferences:
  - Sign up for a free account:
    https://stopafiblibrary.com/
  - Access the library:
    https://stopafib.knowledgelink.tv/

- Social Media
  - Facebook:
    https://www.facebook.com/stopafib
  - Twitter:
    https://www.twitter.com/stopafib
  - YouTube:
    https://www.youtube.com/stopafib

- My AFib Experience in collaboration with the American Heart Association:
  https://www.myafibexperience.org
We are excited to have you here with us for the 2020 Get in Rhythm. Stay in Rhythm® Virtual Atrial Fibrillation Patient Conference! We are thrilled that you are joining us for this powerful, transformative weekend! To make the most of your time at the conference, please review the information below.

YOUR DASHBOARD
The dashboard is your central information hub for the conference. On this dashboard, you will find:
- The main conference sessions.
- Breakout sessions with doctors and other patients.
- Sponsor booths.
- Important links and resources (i.e., sponsor resources, our program book with speaker bios and a place to take notes, acronyms list, a link to the glossary, and more).
- The option to enter questions for speakers.

Your dashboard is customized specifically for you and is an easy way to stay connected and find everything you need in one organized place. The dashboard is where you will go each day to access the conference and breakout sessions, and it is your go-to resource for updates, information, and technical support over the next three days.

CONFERENCE SCHEDULE
We have scheduled the conference to be convenient for all US time zones so that we are not starting too early for those in the Pacific time zone nor ending too late for those in the Eastern time zone.

We start mid-morning at 9:00 am Central time. Given this start time, we will have a late lunch each day, so plan to have water, coffee, and snacks on hand.

The schedule below can help you reserve your time (we may make minor adjustments to serve you).
- Friday, October 30th  9:00 am-5:30 pm CDT
- Saturday, October 31st  9:00 am-6:00 pm CDT
- Sunday, November 1st  9:00 am-1:30 pm CST *

* Please note that the fall time change will take place on Saturday night, so remember to set your clocks back so you can get an extra hour of sleep that night.

JOIN US EARLY FOR NETWORKING
We like to keep the conference on time. Therefore, we encourage you to arrive each morning at 8:30 am CT for “door opening.” Join us in our virtual ballroom for networking and special announcements!

NETWORK WITH OUR SPONSORS
Please make a point to visit with our Conference Sponsors in their Virtual Sponsor booths during breaks and lunches to ask your questions and thank them. All of our Sponsors provide products or services to help those living with atrial fibrillation. You can find more information on each of our sponsors in the Program Book.
ENJOY COMMUNITY TIME

To make the most of your time with us, plan to have hydration, beverages, snacks, and prepared meals on hand, so you can take advantage of everything we offer during breaks and lunch, including sponsor booths and breakout sessions with the presenters.

WE'RE HERE TO SUPPORT YOU

Our team will be available for support during all regularly scheduled sessions via our virtual Help Desk. Should you experience any technical difficulties, have questions about the program, have general questions of any kind, or need any support, this is the place to go.

WEBCAM ETIQUETTE

With most virtual events, video is one-way, making it more difficult for the host and attendees to be engaged and feel connected. We ask that you enable your webcam throughout the conference so our team, as well as your fellow attendees, can see you and feel your enthusiasm, making these three days fun and valuable.

HELPFUL HINT: Be aware of your surroundings. If you need a restroom or other break, be sure to turn off your webcam if you take your device with you. Be aware of what is in your background and within the view of other attendees.

BE PRESENT

Being present is the best gift you can give yourself! Resist the urge to take excessive notes vs. listening and capturing big ideas and concepts. Place your phone on DO NOT DISTURB and turn off your email and text notifications to minimize distractions. Make plans in advance to support your family with their meals and activities, so you are fully engaged.

Additionally, during the conference, you will go into “breakout rooms” with your fellow attendees to get to know each other and share ideas. These breakouts are essential opportunities for sharing.

PLEASE PARTICIPATE. Do not use breakouts to run errands or check your phone. Your fellow attendees are there to support you and are counting on you to support them.

TAKE CARE OF YOURSELF

If you need a break, know that you have, or can have, the videos to go back to after the conference.

• Listen to your body
• Get plenty of rest
• Eat healthfully
• Stay hydrated
• Plan your meals in advance
• Have snacks on hand

STAY ON SCHEDULE

As a live virtual conference, there are no playbacks or recordings unless you upgraded to All Access. We have planned a very thoughtful agenda and presentations. Please block out all of the conference times on your calendar and commit to attending all of the sessions.

CONFERENCE EVALUATION

For your convenience, our Conference Evaluation form is in the back of the Program Book and also available online at

https://www.surveymonkey.com/r/2020GIRvirtual

CONFERENCE HASHTAG

#StopAfib20
### AGENDA

**Friday, October 30, 2020**  
*All times are Central Daylight Time (CDT)*

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<thead>
<tr>
<th>Time</th>
<th>Session</th>
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<tr>
<td>9:00 AM – 10:30 AM</td>
<td><strong>Opening and Keynote</strong></td>
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<tr>
<td></td>
<td>• Welcome and Introduction—Mellanie True Hills</td>
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<td>• Keynote: Answers to the Most Common Afib Patient Questions—Frank Marchlinski, MD</td>
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<td>• Q&amp;A</td>
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<tr>
<td>10:30 AM – 11:00 AM</td>
<td><strong>Break and Visit Sponsors and Dr. Marchlinski</strong></td>
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<td>11:00 AM – 12:30 PM</td>
<td><strong>Medications for Afib Patients</strong></td>
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<td>• Rate and Rhythm Control Medications—John Camm, MD</td>
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<td></td>
<td>• Preventing Afib Strokes with Medications—Gregory Y. H. Lip, MD</td>
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<td></td>
<td>• Q&amp;A</td>
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<tr>
<td>12:30 PM – 2:00 PM</td>
<td><strong>Lunch and Visit Sponsors and Drs. Camm and Lip</strong></td>
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<tr>
<td></td>
<td>• Faculty sessions are 30 minutes</td>
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<td></td>
<td>• Sponsor sessions are 90 minutes</td>
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<tr>
<td>2:00 PM – 3:30 PM</td>
<td><strong>Managing Afib</strong></td>
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<td>• Sinus Rhythm: Bridge to the Future—Eric Prystowsky, MD</td>
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<td>• Genetics, Lifestyle, and Other Risk Factors—Mina Chung, MD</td>
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<td></td>
<td>• Q&amp;A</td>
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<tr>
<td>3:30 PM – 4:00 PM</td>
<td><strong>Break and Visit Sponsors and Drs. Prystowsky and Chung</strong></td>
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<tr>
<td>4:00 PM – 4:50 PM</td>
<td><strong>Panel Discussion: Getting the Best Care</strong></td>
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<tr>
<td></td>
<td>• Mellanie True Hills, Moderator</td>
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<td>• Mina Chung, MD</td>
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<td>• Frank Marchlinski, MD</td>
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<td>• Eric Prystowsky, MD</td>
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<tr>
<td>4:50 PM – 5:30 PM</td>
<td><strong>Resources and Wrap Up</strong></td>
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Saturday, October 31, 2020  All times are Central Daylight Time (CDT)

9:00 AM – 10:30 AM  Catheter Ablation Procedures and Tools
• Catheter Ablation Procedures and Tools—Part 1—Jonathan Piccini, MD
• Catheter Ablation Procedures and Tools—Part 2—Phil Cuculich, MD
• Q&A

10:30 AM – 11:00 AM  Break and Visit Sponsors and Drs. Piccini and Cuculich

11:00 AM – 12:30 AM  Catheter Ablation Evolution and Innovation
• What CABANA Told Us About the Future of Ablation—Douglas Packer, MD
• Innovations in Ablation and Stroke Prevention—Larry Chinitz, MD
• Q&A

12:30 PM – 2:00 PM  Lunch and Visit Sponsors and Drs. Packer and Chinitz
• Faculty sessions are 30 minutes
• Sponsor sessions are 90 minutes

2:00PM – 3:30 PM  Afib Surgery
• Mini Maze and Hybrid/Convergent Procedures—Randall Wolf, MD
• Indications for Afib Surgery & Open Chest/Concomitant Maze—Ralph Damiano, MD
• Q&A

3:30 PM – 4:00 PM  Break and Visit Sponsors and Drs. Wolf and Damiano

4:00 PM – 4:55 PM  Panel Discussion: How to Choose the Right Procedure
• Mellanie True Hills, Moderator
• Andrea Natale, MD
• Larry Chinitz, MD
• Phil Cuculich, MD
• Ralph Damiano, MD
• Jonathan Piccini, MD
• Randall Wolf, MD

4:55 PM – 6:00 PM  Wrap Up

Time changes from CDT to CST overnight Saturday night

Sunday, November 1, 2020  All times are Central Standard Time (CST)

9:00 AM – 11:00 AM  FDA and Digital Health
• What Patients Should Know About the FDA and Q&A—Andrew Farb, MD
• Consumer Devices for Digital Health and Q&A—David McManus, MD

11:00 AM – 11:30 AM  Break and Visit Sponsors and Drs. Farb and McManus

11:30 AM – 1:30 PM  Living with Afib and Takeaways—Mellanie True Hills
StopAfib.org would like to thank Bristol Myers Squibb™ and Pfizer for supporting the Get in Rhythm. Stay in Rhythm.® Atrial Fibrillation Patient Conference.
ERIC N. PRYSTOWSKY, MD
ADVOCATE FOR PATIENTS AWARD

The Eric N. Prystowsky, MD Advocate for Patients Award recognizes a healthcare provider who has demonstrated outstanding service to and contributions for the benefit of afib patients and their families.

Dr. Eric N. Prystowsky, an electrophysiologist at St. Vincent’s in Indianapolis, was the first recipient of this award—then called the “Advocate for Patients Award,” in 2013.

He was selected because he has played such an important role in getting the afib patient community a seat at the table with our doctors, which means the people who make decisions about our care are able to consider our concerns, wants, and needs. Here are just a few examples of what he has done and what it means to be an advocate for patients:

• While president of the Heart Rhythm Society, he arranged for patient organizations to participate in the annual medical conference and established that HRS would provide free exhibit booths for patient organizations to connect with electrophysiologists and other healthcare providers.
• Brought the patient perspective to guidelines committees so that our treatment would be patient-focused.
• Engaged patients in think tanks and advisory boards to influence decisions about our care.
• Brought afib patients to speak at medical conferences so doctors and nurses would understand the patient perspective and do a better job of treating us.

Dr. Prystowsky is the most sought-out afib expert at medical conferences around the globe. He is a prolific contributor to research and treatment literature, having co-authored two textbooks, published more than 700 articles, sat on numerous guidelines committees and think tanks, served on the editorial boards of 16 journals, and for many years has been the Editor-in-Chief of the highly-prestigious Journal of Cardiac Electrophysiology.

Additionally, Dr. Prystowsky and StopAfib.org have worked together on a campaign to preserve the brain, helping patients and their doctors understand the role that sinus rhythm plays in stroke prevention in atrial fibrillation.

At the 2016 Get In Rhythm. Stay In Rhythm. Atrial Fibrillation Patient Conference, we renamed this award in his honor as the Eric N. Prystowsky, MD Advocate for Patients Award.

Each year, at the Get In Rhythm. Stay In Rhythm.® Atrial Fibrillation Patient Conference, we bestow the Eric N. Prystowsky, MD Advocate for Patients Award on a very deserving healthcare provider.

Past recipients of the Eric N. Prystowsky, MD Advocate for Patients Award include:

2013: Eric N. Prystowsky, MD
2017: Andrea Natale, MD
2018: Doug Packer, MD
2019: Hugh Calkins, MD
There are many causes for stroke, but your risk increases when you suffer from Afib.

AFIB IS ASSOCIATED WITH A 5-FOLD INCREASED RISK OF STROKE.

DELYING A CATHETER ABLATION PROCEDURE CAN BE DETRIMENTAL TO YOUR HEALTH.

What may happen if AFib is left untreated?

1 in 5

Patients progress in 1 year.\textsuperscript{3}

From

Paroxysmal (Occasional) AFib

To

Persistent AFib

Paroxysmal AFib is much easier to treat than Persistent AFib.

AFib is a progressive disease that may get worse and become harder to treat.

AFib may cause a wide variety of symptoms including palpitations, or racing heart beat, fatigue, shortness of breath, reduced ability to exercise, and anxiety.\textsuperscript{2} If left untreated, these symptoms may get worse.

Your risk of stroke and heart failure is 5x greater.\textsuperscript{1,2}

Catheter ablation is a safe and effective way to treat AFib when medications don’t work or cause negative side effects.\textsuperscript{2}

Often performed as an outpatient procedure

12 month post-procedure success rates for catheter ablation for AFib are about 80%\textsuperscript{4}

May improve quality of life and reduce symptoms\textsuperscript{2}

May alleviate the need to take medication

To learn more and find a heart arrhythmia doctor, or Electrophysiologist, near you, visit [www.getsmartaboutafib.com/afibpatient](http://www.getsmartaboutafib.com/afibpatient)

\textsuperscript{1}In patients, success defined as freedom from any atrial arrhythmia (defined as Non-Atrial Fibrillation, Atrial Flutter, Atrial Flutter-Atrial Fibrillation) 12 months post-procedure when operator remained in the preset contact force range. \textsuperscript{2} Often patients required one hour or more of the procedure. \textsuperscript{3} AFib is a progressive disease that may get worse and become harder to treat. \textsuperscript{4} May improve quality of life and reduce symptoms. \textsuperscript{5} May alleviate the need to take medication.

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*As with any medical treatment, individual results may vary. Only a cardiologist or electrophysiologist can determine whether ablation is an appropriate course of treatment. There are potential risks including bleeding, swelling or bruising at the catheter insertion site, and infection. More serious complications are rare, which can include damage to the heart or blood vessels; blood clots (which may lead to stroke); heart attack, or death. These risks need to be discussed with your doctor and recovery takes time. The success of this procedure depends on many factors, including your physical condition and your body’s ability to tolerate the procedure. Use care in the selection of your doctors and hospital, based on their skill and experience.*

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**Important Information:** Prior to use, refer to the instructions for use supplied with this device for indications, contraindications, side effects, warnings and precautions.

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Mellanie True Hills, CSP
Founder of StopAfib.org, Author, Patient Advocate
Conference Host

Following a brush with death in emergency heart surgery and a subsequent close call with a stroke due to atrial fibrillation, Mellanie True Hills left behind her high-tech executive life to use her second chance to help others avoid heart disease and stroke.

She founded the non-profit American Foundation for Women’s Health and StopAfib.org, a patient advocacy organization that provides information and support for those living with atrial fibrillation (afib). She speaks at medical conferences, hospital atrial fibrillation events, and corporate and association events.

From partnering in Facing AFib featuring daytime TV star Susan Lucci and the AF Stat coalition featuring NBA Hall-of-Famer Jerry West, to following Barry Manilow at the lectern in front of members of Congress, atrial fibrillation and stroke awareness are real passions for Mellanie. Through StopAfib.org, the most visited heart arrhythmia site worldwide, she seeks to raise awareness of atrial fibrillation, wipe out afib-related strokes, improve quality of life of those living with afib, and enhance communication with health-care providers.

Successes include creating Atrial Fibrillation Awareness Month and lobbying with other organizations to gain U.S. Senate designation of September as National Atrial Fibrillation Awareness Month. She brings the voice of the atrial fibrillation patient community to think tanks, health policy discussions in Washington, DC, and awareness-raising coalitions and partnerships worldwide. She is the author of the multiple award-winning book, A Woman’s Guide to Saving Her Own Life: The HEART Program for Health and Longevity, and two best-sellers, Intranet Business Strategies (©Wiley) and Intranet as Groupware (©Wiley). She is a regular contributor on patient perspectives to medical publications and has been featured by hundreds of media around the globe.

Twitter: @stopafib
Eliz Greene
Livestream Host

Eliz was seven-months pregnant with twins when she suffered a massive heart attack. Her life changed, not only did she survive a ten-minute cardiac arrest, the cesarean delivery of her daughters and open-heart surgery, all on the same day, she also gained new perspective and passion for life. In the years since her heart attack she has dedicated herself to protecting her heart health and to inspiring others to pay attention to their health. She advocates for advancement in treatment and technology. Her life was saved through the use of Beating Heart Bypass and she currently uses an implanted loop recorder to diagnose her arrhythmia.

Eliz’s humorous and energetic style makes her one of the top female motivational speakers and a dynamic hybrid event emcee. She built a successful business as a heart health speaker, journalist and author. Her articles and interviews have an international audience. Eliz’s facilitated mastermind sessions leverage her business and entrepreneurial insights and high level moderation skills. Whether it is a heart health program or an entertaining stress management keynote, Eliz gets participants on their feet, dancing, and sends them home ready to do something different!

The author of four books including *The Busy Woman’s Guide to a Healthy Heart* and a Top 50 Health and Wellness Blog, she was named a Top Ten Online Influencer on Stress. Eliz provides well-researched, down-to-earth tips and strategies to fit into an already busy day. She has been seen on CNN, TNT, Lifetime and The Doctors, and works with leaders and high performance teams to limit the impact of stress so they can increase productivity and feel better.

Twitter: @elizgreene
Professor Camm graduated from Guy’s Hospital, London and pursued a career in cardiology at St Bartholomew’s Hospital, London, before moving to St George’s in 1986. He was elected Chair of Medicine in October 1990.

His interests include cardiac arrhythmias, atrial fibrillation, stroke prevention, anticoagulation, clinical cardiac electrophysiology, cardiac pacemakers, syncope, and risk stratification in post-myocardial infarction, heart failure, cardiomyopathy, and atrial fibrillation patients.

Professor Camm has been involved in the production of numerous guidelines, including the ESC guidelines for the management of atrial fibrillation. He is Editor-in-Chief of European Heart Journal – Case Reports and Clinical Cardiology, an editorial board member of a further 15 journals, and Editor of the European Heart Journal, the European Society of Cardiology Textbook of Cardiovascular Medicine and ESC CardioMed.

He has written or edited more than 40 books, predominantly in the field of cardiac arrhythmology. He has authored or co-authored more than 1450 peer reviewed papers, more than 500 book chapters, in excess of 2500 accepted abstracts, and has delivered more than 1000 international lectures.

Professor Camm is a Fellow of the Royal College of Physicians (London, Edinburgh and Glasgow), the American College of Cardiology, the American Heart Association, the Heart Rhythm Association, and the European Society of Cardiology (ESC). He was awarded the ESC Gold Medal in 2005 and the British Cardiovascular Society Mackenzie Medal in 2008.
Dr. Larry Chinitz serves as the Clinical Director in cardiology at NYU Langone Health. He graduated from New York University in New York, and completed his residency and fellowship at New York University. Dr. Chinitz is an internationally renowned expert in the management of heart rhythm disorders. He established NYU Langone’s Clinical Cardiac Electrophysiology program and the Heart Rhythm Center to provide state-of-the-art cardiac rhythm management of atrial and ventricular arrhythmias.

His current research focuses on the development of novel technology for use in catheter ablative therapies, investigation of neuro stimulation and pharmacotherapy to help regulate irregular heartbeats, and other innovative treatments for patients at risk for sudden cardiac death. In February 2014, Dr. Chinitz lead a team of NYU Langone specialists in implanting—for the first time in the United States—the bullet-sized Micra™ Transcatheter Pacing System, the world’s smallest leadless cardiac pacemaker.

Twitter: @azrielleib
Mina Chung, MD, FHRS

Mina Chung, MD, is a clinical cardiac electrophysiologist and translational scientist at the Cleveland Clinic. Her overall goal is to bring the basic advances in atrial fibrillation research back to the bedside as soon as possible. She initially studied the inflammatory connections of postoperative atrial fibrillation (AF), producing seminal studies that contributed to interest in upstream therapies for AF.

Over a decade ago Dr. Chung founded and began leading a multidisciplinary group at the Cleveland Clinic focused upon the study of genetics and genomics in AF. This group has obtained NIH funding since then to study the genetics of AF, identifying genes and causal genetic variants and leading to new insights for functional and mechanistic studies, again with the aim of bringing these findings back to the patients. Dr. Chung brought in inducible pluripotent stem cell (iPSC) reprogramming and differentiation technologies into her labs, allowing creation of patient-specific cardiomyocyte models for exploring genetic mechanisms of AF. She is also exploring artificial intelligence and big data analyses in cardiovascular medicine using machine learning methodologies. Dr. Chung directs the Cleveland Clinic Center of Research Excellence in Cardiovascular Translational Functional Genomics, which has been extending the group’s functional genomics infrastructure to other cardiovascular diseases, including aortic, pericardial, heart failure, and other arrhythmia conditions. Dr. Chung and a large multidisciplinary team were awarded an American Heart Association Strategically Focused Research Network Center grant for translational studies in AF, including a clinical trial testing a novel drug and lifestyle modifications for AF based on the team’s functional genomics work. She also directs the American Heart Association COVID-19 Research Coordinating Center.

Dr. Chung has also contributed to multicenter clinical trials and guideline/consensus documents, including leading the 2020 AHA Scientific Statement on lifestyle and risk factor modification for reduction of atrial fibrillation. She also holds leadership roles in several professional societies. She has been named in Best Doctors in America, 2001 through 2020 and has received the Cleveland Clinic Internal Medicine Residency Program Research Mentor of the Year Award and the Maria and Sam Miller Professional Achievement Award for Clinical Research. She is committed to teaching and mentoring the next generation of clinicians and scientists.

Twitter: @EP_mom1
Phil Cuculich, MD

Dr. Phillip Cuculich is a clinical cardiac electrophysiologist and Associate Professor of Medicine and Radiation Oncology at Washington University School of Medicine in St. Louis. His research passion lies at the interface of cardiac electrophysiology and other medical specialties to ultimately improve human health.

As a member of the Cardiac Bioelectricity and Arrhythmia Center (CBAC) at Washington University, he led clinical development and testing of a noninvasive imaging system (electrocardiographic imaging, ECGI) to create three-dimensional maps of arrhythmias, with a focus on heart rhythm disorders such as atrial fibrillation and ventricular tachycardia. Clinically, he pioneers new ways to safely and successfully treat individuals with heart rhythm disorders.

His trans-disciplinary approach to solving clinical problems has brought him into close collaboration with radiation oncologists to develop an entirely noninvasive method to map and treat heart rhythm disorders. First report of this collaborative work was published in the *New England Journal of Medicine*. Results of the phase 1/phase 2 prospective trial won the prestigious James T. Willerson Award for Best Paper in Clinical Science in Circulation in 2019. He is the co-Director of the Center for Noninvasive Cardiac Radioablation (CNCR) and is widely considered a world leader in the field of noninvasive ablation.

His collaborations across traditional boundaries have also allowed him to lead a team to develop a noninvasive method to electrically map uterine contractions during pregnancy, bringing EP into obstetrics. The goal of the project is to develop a tool that identifies electrical signatures of premature birth by assessing uterine electrophysiology, with results recently published in Science Translational Medicine.

By combining basic mechanisms of human physiology with innovative, collaborative, forward-looking solutions, Dr. Cuculich’s vision of personalized medicine ultimately develops specific therapies for individuals based on the unique characteristics of each condition.

Twitter: @DoctorPhillEP
Ralph J. Damiano Jr., MD, is the Evarts A. Graham Professor of Surgery and chief of the Division of Cardiothoracic Surgery at Washington University School of Medicine and Barnes-Jewish Hospital in St. Louis and co-chairman of the Heart & Vascular Center. He received his medical degree from Duke University and went on to complete both his general surgery and cardiothoracic surgery training at Duke University Medical Center.

Damiano’s first faculty appointment was at the Medical College of Virginia from 1989 to 1996. During his tenure, he named Director of Surgical Electrophysiology and the Cardiothoracic Surgical Research Laboratories. Damiano also was medical director of the Medical College of Virginia/Richmond Memorial Hospital Heart Program. In 1996, Damiano was appointed professor of surgery and chief of the Division of Cardiothoracic Surgery at the Milton S. Hershey Medical Center at Penn State University. In 2000, Damiano was appointed chief of the Section of Cardiac Surgery in the Division of Cardiothoracic Surgery at Washington University in St. Louis. In 2005, he was named vice chairman for clinical services in the Department of Surgery. He was named Co-Chair of the Heart & Vascular Center at its inception in November, 2009. In May 2014, Damiano was appointed Chief of the Division of Cardiothoracic Surgery and assumed the Evarts A. Graham Professorship.

Damiano has authored more than 330 scientific publications and given more than 500 lectures and presentations around the nation and the world. His major contributions have been in the area of myocardial preservation during heart surgery, surgical electrophysiology, and minimally invasive cardiac surgery. He has been editor-in-chief of the journal Innovations since 2008. Damiano is past president of the International Society for Minimally Invasive Cardiothoracic Surgery. He is an inaugural member of the James L. Cox Fellowship in Atrial Fibrillation Surgery.

Damiano has been a pioneer in minimally invasive cardiac surgery, performing the first robotically assisted CABG procedure in North America in December 1998 and completing the first prospective clinical trial in the world on robotically assisted CABG. He has been a leader in the surgical treatment of arrhythmias. His group has been continuously funded by the NIH for over 30 years. They have developed the gold-standard surgical procedure, the Maze operation, which has been adopted around the world, and a less-invasive procedure for atrial fibrillation. He received a National Research Service Award from the NIH for his work on the surgical treatment of arrhythmias.
Andrew Farb, M.D. is the Chief Medical Officer in the Office of Cardiovascular Devices at FDA’s Center for Devices and Radiological Health (CDRH). He is a graduate of Dartmouth College (B.A.) and Cornell University Medical College (M.D.). He completed an internship and residency in internal medicine, a one-year residency in anatomic pathology, and a fellowship in clinical cardiology at The New York Hospital–Cornell University Medical Center.

Dr. Farb is board-certified in Internal Medicine and Cardiovascular Diseases. Following a fellowship in cardiovascular pathology at The Armed Forces Institute of Pathology (AFIP), he served as a staff cardiovascular pathologist at AFIP with research interests in and multiple publications on coronary atherosclerosis and mechanisms of thrombosis, coronary artery interventions, and structural heart disease.

He joined the FDA in 2004, where he has concentrated on clinical study development for interventional cardiology, structural heart, and peripheral vascular devices as well as providing guidance on non-clinical animal testing. Since 2013, Dr. Farb has focused on regulatory approaches to facilitating medical device innovation and early stage medical device studies in the US. He co-authored FDA’s Guidance document entitled “Investigational Device Exemptions (IDEs) for Early Feasibility Medical Device Clinical Studies, Including Certain First in Human (FIH) Studies,” and he is the Co-Leader of CDRH’s Early Feasibility Study Program.

In the field of atrial fibrillation, Dr. Farb has served as the lead FDA clinical reviewer for medical devices designed to close the heart’s left atrial appendage. These devices are intended to reduce the risk of stroke in atrial fibrillation patients who are seeking an alternative to anticoagulation.

In addition to his position at FDA, Dr. Farb provides cardiovascular pathology consultations and engages in direct patient care as an attending physician in clinical cardiology.
Gregory Y.H. Lip, MD

Professor Lip, MD, is Price-Evans Chair of Cardiovascular Medicine, at the University of Liverpool, UK – and Director of the Liverpool Centre for Cardiovascular Science at the University of Liverpool and Liverpool Heart & Chest Hospital. He is also Distinguished Professor at Aalborg University, Denmark; Adjunct Professor at Yonsei University and Seoul National University, Seoul, Korea. He also holds Visiting or Honorary Professorships in various other Universities in UK, Serbia (Belgrade), China (Beijing, Nanjing, Guangzhou), Thailand (Chiangmai) and Taiwan (Taipei).

Half of his time is spent as a clinical cardiologist, including outpatient clinics (leading atrial fibrillation and hypertension specialist services) and acute cardiology.

Professor Lip has had a major interest into the epidemiology of atrial fibrillation (AF), as well as the pathophysiology of thromboembolism in this arrhythmia. Furthermore, he has been researching stroke and bleeding risk factors, and improvements in clinical risk stratification. The CHA2DS2-VASc and HAS-BLED scores - for assessing stroke and bleeding risk, respectively – were first proposed and independently validated following his research, and are now incorporated into international guidelines. In 2014, Professor Lip was ranked by ExpertScape as the world’s leading expert in the understanding and treatment of AF [http://bit.ly/2apB1Dt], a position still maintained in 2020 (https://bit.ly/3eP3qR4).

Professor Lip was on the writing committee for various international guidelines, including the American College of Chest Physicians (ACCP) Antithrombotic Therapy Guidelines for Atrial Fibrillation, as well as various guidelines and/or position statements from the European Society of Cardiology (ESC) or EHRA. He was recently Chair of the new 2018 ACCP Guidelines on antithrombotic therapy for AF.

Professor Lip has acted as senior/section editor for major international textbooks and at senior editorial level for major international journals, including *Thrombosis & Haemostasis* (Editor-in-Chief, Clinical Studies); *Europace* (Associate Editor); and *Circulation* (Guest Editor).
Francis E. Marchlinski, MD, FHRS

Dr. Marchlinski is the Richard T and Angela Clark President’s Distinguished Professor of Medicine at the Perelman School of Medicine at the University of Pennsylvania, the Director of Electrophysiology, University of Pennsylvania Health Care System and the Director of the Electrophysiology Laboratory at the Hospital of the University of Pennsylvania.

Dr. Marchlinski is a graduate of the University of Pennsylvania Medical School. He completed his post-doctoral internal medicine residency and cardiology/electrophysiology fellowship training at the Hospital of the University of Pennsylvania.

For over thirty years Dr. Marchlinski has remained at the cutting edge of cardiac rhythm management. He has authored or co-authored over 450 original scientific articles and over 200 book chapters/reviews/editorials on a variety of topics in cardiac electrophysiology. His EP team at Penn has worked to successfully improve localizing and ablation techniques for the treatment of both atrial fibrillation and ventricular tachycardia and optimize device therapy for treating heart failure and preventing sudden cardiac death.

Dr. Marchlinski has served on the International Heart Rhythm Society Committee to establish guidelines for the treatment of atrial fibrillation and ventricular tachycardia using catheter ablation techniques. He has been the recipient of the Luigi Mastroianni Clinical Innovator Award, the Venice Arrhythmia Distinguished Scientist Award and the ACTS Distinguished Investigator Award – Career Achievement – Translation from Early Clinical Use to Applicability for Widespread Clinical Practice.

Dr. Marchlinski is on the editorial board of Circulation, Arrhythmias and Electrophysiology, American Journal of Cardiology, Heart Rhythm Journal, Journal of Cardiovascular Electrophysiology, Journal of Interventional Cardiac Electrophysiology, and JACC- Electrophysiology and is the Arrhythmia Section Editor for Journal of the American College of Cardiology.

Dr. Marchlinski has organized and directed multiple fellowship training courses, regional and international EP symposia, and has received numerous teaching awards at the University of Pennsylvania.
David McManus, MD, FHRS

Dr. McManus is a clinical and research cardiac electrophysiologist at the University of Massachusetts Medical School (UMMS), where he is a Professor and Vice-Chair of Medicine. He is also a Distinguished Dr. Marcellette Williams Scholar, Chief of the University of Massachusetts Medical Center’s Section of Connected Cardiovascular Healthcare, and Director of the Anticoagulation Service.

His research continues to focus on use of technology to enhance the diagnosis and treatment of older patients with arrhythmias, and he presently serve as PI or MPI on 4 National Institute of Health or National Science Foundation-funded clinical trials and studies. He also serves as a Multi-PI of the Center for Advancing Point-of-Care Technologies in Heart, Lung, Blood and Sleep Diseases, one of four NIH centers focused on point-of-care technology nationally.

He has authored or co-authored over 220 scientific manuscripts. He serves on the Heart Rhythm Society’s National Research and Digital Medicine Committees and is the Founding Editor-in-Chief of the Cardiovascular Digital Health Journal.
Andrea Natale, MD, FHRS

Patients from around the world seek treatment from Dr. Natale. A world recognized leader in the field of electrophysiology, Dr. Natale is a dedicated clinician, academician and researcher.

Prior to the establishment of Texas Cardiac Arrhythmia Institute at St. David’s Medical Center, Dr. Natale was a member of the Cardiovascular Medicine Department at the Cleveland Clinic from 1999 to 2007, serving most recently as Section Head for the Department of Cardiac Pacing and Electrophysiology and as Medical Director for the Cleveland Clinic’s Center for Atrial Fibrillation. In 2006, Dr. Natale was named to the Food and Drug Administration’s Task Force on Atrial Fibrillation.

A committed academician, Dr. Natale’s faculty positions at a variety of prestigious universities include Duke University and Stanford University. He has been an invited lecturer at more than 200 symposiums and conferences around the world, and is the author or co-author of hundreds of published articles on pacing and electrophysiology. In addition to serving on the editorial boards of numerous medical journals, he is editor-in-chief of the Journal of Atrial Fibrillation.

Dr. Natale’s greatest reward is restoring his patients to a life free of cardiac arrhythmia. He pioneered a circumferential ultrasound vein-ablation system to correct atrial fibrillation and performed the procedure on the world’s first five patients. He also developed some of the current catheter-based cures for atrial fibrillation, and was the first electrophysiologist in the nation to perform percutaneous epicardial radiofrequency ablation, which is a treatment for people who fail conventional ablation. He also holds a patent for a device used to treat Atrial Fibrillation.

A forefront researcher, Dr. Natale focuses on innovative advances in the treatment of atrial fibrillation. His goal is to benefit patient care through technologies such as robotic devices and specialized ablation catheters.

Dr. Natale was the 2017 recipient of the Eric N. Prystowsky, MD Advocate for Patients Award bestowed by StopAfib.org.
Douglas L. Packer, MD, FHRS

Douglas L. Packer, MD is a consultant in the Division of Cardiovascular Diseases, Department of Internal Medicine, at Mayo Clinic Rochester. He is the Director of the Heart Rhythm Services and the Director of the Translational Electrophysiology Research Laboratory. Dr. Packer is recognized with the academic rank of the John M. Nasseff, Sr., Professor in Cardiovascular Diseases, and is internationally known in cardiac electrophysiology.

He received the MD degree at the University of Utah and completed an internship, residency and fellowship at Duke University, where he was on staff before coming to Mayo. His honors and awards include the Distinguished Service Award from Brigham Young University.

Dr. Packer is active in the Heart Rhythm Society where he is a past president and member of the Board of Trustees. He is also active in the American Heart Association and the American College of Cardiology. He has served on editorial boards for the American Heart Journal, the Journal of Cardiovascular Electrophysiology, Heart Rhythm journal, and the Journal of the American College of Cardiology. He also has served on National Heart, Lung, and Blood Institute work groups on atrial fibrillation.

Dr. Packer has been an active teacher and mentor, and also lectures widely on cardiac arrhythmias. He has written or co-authored more than 280 publications. He has lectured extensively in national and international meetings, giving over 1,400 invited lectures in 37 countries. He has served on the executive committee of a number of NIH multicenter randomized clinical trials, including the MUSTT, SCD-HeFT, and HAT Trials. Dr. Packer is also the International Principal Investigator of the NIH-funded CABANA Study and leads the consortium of centers directing the trial.

Dr. Packer is a Mayo Clinician Investigator. His translational work focuses on the mechanisms and ablation of atrial fibrillation and other cardiac arrhythmias, autologous fibroblast modulation of electrical impulse propagation in the heart, and the development of carbon particle catheter-free ablation of arrhythmias. His clinical work investigates 4/5-dimensional integrated image-guided ablation and the development of new energy sources for the modification of cardiac tissue. His work has been funded in part by private foundations, the American Heart Association, and the NIH. Dr. Packer holds US and European patents in the development of intracardiac ultrasound and 4/5D imaging.

Dr. Packer was the 2018 recipient of the Eric N. Prystowsky, MD Advocate for Patients Award bestowed by StopAfib.org.
Jonathan Piccini, MD, FHRS

Jonathan P. Piccini, MD, FHRS is a clinical cardiac electrophysiologist and Associate Professor of Medicine with Tenure at Duke University Medical Center and the Duke Clinical Research Institute. He is the Director of the Cardiac Electrophysiology section at the Duke Heart Center. His focus is on the care of patients with atrial fibrillation and complex arrhythmias, with particular emphasis on catheter ablation, left atrial appendage occlusion, and lead extraction.

His research interests include the conduct of clinical trials and the assessment of innovative cardiovascular therapeutics for the care of patients with heart rhythm disorders. He has served as the principal investigator and/or study chair for several clinical trials and registries, including NOVA AF, RESTORE SR, ORBIT AF I & II, and GENETIC AF, the first trial of pharmacogenetic guided rhythm control.

He also serves as the principal investigator for the American Heart Association-Get with the Guidelines Program Analytic Center. He is an associate editor for the American Heart Journal and serves on the editorial board of several journals, including Heart Rhythm, the European Heart Journal, JACC: Clinical Electrophysiology, Circulation: Arrhythmia & Electrophysiology and the Journal of Cardiac Electrophysiology. Dr. Piccini has more than 400 publications in the field of heart rhythm medicine and has been the recipient of several teaching and mentorship awards.

Twitter: @JonPicciniSr
Eric N. Prystowsky, MD, FHRS

Dr. Prystowsky is a practicing Cardiologist with St. Vincent Medical Group, and Director of the Clinical Electrophysiology Laboratory at St. Vincent Indianapolis Hospital. He is also a Consulting Professor of Medicine at Duke University Medical Center.

Dr. Prystowsky is a graduate of Pennsylvania State University and the Mt. Sinai School of Medicine. He completed his internal medicine training at Mt. Sinai Hospital, New York City, and his training in cardiology and clinical electrophysiology at Duke University Medical Center, Durham, North Carolina.

From 1979 to 1986, Dr. Prystowsky was a full-time faculty member at the Indiana University School of Medicine, where he was Director of the Electrophysiology Laboratory. In 1986, he returned to Duke University as Professor of Medicine and Director of the Cardiac Arrhythmia Center. He joined The Care Group in 1988.

In addition to co-authoring two textbooks, Cardiac Arrhythmias: An Integrated Approach for the Clinician and Clinical Electrophysiology Review, Dr. Prystowsky has also authored over 700 publications concerning cardiac arrhythmias. He is the Editor-in-Chief of The Journal of Cardiovascular Electrophysiology and is also on the editorial board of 16 journals, including Circulation.

Additionally, he is past chairman of the American Heart Association’s Committee on Electrocardiography and Electrophysiology, past president of the Heart Rhythm Society, and past chairman of the Test Writing Committee for Clinical Electrophysiology for the American Board of Internal Medicine. He was given the Distinguished Alumni Award from Pennsylvania State University in 2007.

Dr. Prystowsky was the first-ever recipient, in 2013, of the Advocate for Patients Award bestowed by StopAfib.org. The award was renamed in his honor to the Eric N. Prystowsky, MD Advocate for Patients Award, which is given annually.
Randall Wolf, MD

Dr. Randall Wolf is a surgical innovator who pioneered a minimally-invasive procedure for the surgical treatment of lone AF. He has performed over 1,000 Wolf mini maze procedures and has demonstrated the procedure to over 600 heart surgeons worldwide. He has been a visiting professor in 18 countries, including at Oxford University, University of Tokyo and Peking University. Dr. Wolf has delivered hundreds of invited lectures at hospitals, academic meetings and seminars around the world.

Dr. Wolf was the first North American heart surgeon to perform DaVinci cardiac surgery. He has served as Professor of Surgery, Ohio State University and Professor of Surgery and Biomedical Engineering, University of Cincinnati, and the inaugural Ethicon-Endosurgery Chair for Innovation in Surgery.

He has over 100 peer-reviewed papers and textbook chapters and was the inaugural co-editor of the Innovations Journal. He has served as President of both the International Society of Minimally Invasive Cardiothoracic Surgery (ISMICS) and the 21st Century Cardiothoracic Surgery Club.

When not in the operating theatre or lecturing, he performs stage and close-up magic.
TAKE CONTROL OF YOUR ATRIAL FIBRILLATION

Ask us about our products that are designed to help detect and manage atrial fibrillation (AF), and treat paroxysmal and persistent AF.

Visit medtronic.com to learn about our full AF portfolio.
Brief Statements

Catheter Ablation for Atrial Fibrillation

The Arctic Front Advance™ cardiac cryoablation catheter system is indicated for the treatment of drug refractory recurrent symptomatic paroxysmal and persistent atrial fibrillation (episode duration less than 6 months).

Complications, while infrequent, can occur during catheter ablation. Some of the risks include bleeding and bruising where the catheter was inserted, cough, shortness of breath, infection, temporary or permanent stroke, and severe complications leading to hospitalization or potentially death. Your physician can further explain these complications as a part of a comprehensive risk/benefit evaluation, as you consider catheter ablation for your condition. This treatment is prescribed by your physician. This treatment is not for everyone. Please talk to your doctor to see if it is right for you. Your physician should discuss all potential benefits and risks with you. Although many patients benefit from the use of this treatment, results may vary. Information on this site should not be used as a substitute for talking with your doctor. Always talk with your doctor about diagnosis and treatment information. For further information, please call the Medtronic toll-free number at 1-800-551-5544 (8:00 a.m. to 5:00 p.m. CT, Monday–Friday) or see the Medtronic website at medtronic.com.

Reveal LINQ™ Insertable Cardiac Monitor

The Reveal LINQ insertable cardiac monitor is an implantable patient-activated and automatically activated monitoring system that records subcutaneous ECG and is indicated in the following cases:

- Patients with clinical syndromes or situations at increased risk of cardiac arrhythmias
- Patients who experience transient symptoms such as dizziness, palpitation, syncope, and chest pain that may suggest a cardiac arrhythmia

The device has not been tested specifically for pediatric use.

Possible risks associated with the implant of the Reveal LINQ insertable cardiac monitor include, but are not limited to, infection at the surgical site, device migration, erosion of the device through the skin, and/or sensitivity to the device material.

Treatment with a Reveal LINQ insertable cardiac monitor is prescribed by your physician. This treatment is not for everyone. Please talk to your doctor to see if it is right for you. Your physician should discuss all potential benefits and risks with you. Although many patients benefit from the use of this treatment, results may vary. For further information, please call the Medtronic toll-free number at 800-551-5544 (7:00 a.m. to 7:00 p.m. CT, Monday–Friday) or see the Medtronic website at medtronic.com.

SureScan™ MRI Pacemaker, ICD, CRT-P, and CRT-D Patients

Additional Device Information

An implantable pacemaker, defibrillator, or cardiac resynchronization therapy (CRT) system relieves symptoms of heart rhythm disturbances. It does this by restoring normal heart rates. A normal heart rate provides your body with the proper amount of blood circulation. The pacemaker system is intended for patients who need rate-adaptive pacing or chronic pacing or for patients who may benefit from synchronizing the pumping of the heart chambers. In addition to these functions, an implantable cardioverter defibrillator (ICD) system delivers therapies to treat patients with heart rhythm disorders or who are at significant risk of developing heart rhythm disorders. A cardiac resynchronization therapy (CRT) pacemaker system (also referred to as CRT-P) or ICD system (also referred to as CRT-D) include the functions of a pacemaker or ICD and also deliver therapies to treat patients who may benefit from synchronizing the pumping of the heart chambers. A CRT-D also delivers therapies to treat patients with heart rhythm disorders or who are at significant risk of developing heart rhythm disorders.

Risks associated with these implantable device systems include, but are not limited to, infection at the surgical site and/or sensitivity to the device material, failure to deliver therapy when it is needed, or receiving extra therapy when it is not needed. After receiving an implantable device system, you will have limitations with magnetic and electromagnetic radiation, electric or gas-powered appliances, and tools with which you are allowed to be in contact.

Your physician may prescribe an MRI scan for you. A magnetic resonance imaging (MRI) scan is a type of medical imaging that uses magnetic fields to create an internal view of the body, which doctors use for diagnostic purposes. Unlike previous generations of heart devices, your SureScan heart device system was designed and tested to be used safely with MRI scanners. The electromagnetic fields present during MRI scans have the potential to cause hazardous effects on heart devices, which can result in cardiac tissue heating, inappropriate therapy, and dangerous arrhythmias. Due to the unique design of the SureScan heart device systems, these risks are reduced to a very low level so that under specified conditions, patients may safely undergo MRI scans. You can undergo an MRI scan as long as you meet the patient eligibility requirements that Medtronic provides to your heart doctor and the scan is conducted according to Medtronic directions. For example, your heart device system must consist only of a Medtronic SureScan heart device and the appropriate number of SureScan labeled leads. Visit mrisurescan.com. Any other combination may result in a hazard to the patient during an MRI scan.

This treatment is prescribed by your physician. This treatment is not for everyone. Please talk to your doctor to see if it is right for you. Your physician should discuss all potential benefits and risks with you. Although many patients benefit from the use of this treatment, results may vary. For further questions, contact Patient Services at 1-800-551-5544.
StopAfib.org would like to thank Silver Sponsor SANOFI for supporting the Get in Rhythm. Stay in Rhythm.® Atrial Fibrillation Patient Conference.
Meet KardiaMobile 6L. Your personal 6-lead EKG.

Take a medical-grade EKG anytime, anywhere. In just 30 seconds, detect Atrial Fibrillation, Bradycardia, Tachycardia or Normal heart rhythm. Now with 6-leads, there’s 6-times the heart data to share with your doctor.

AliveCor
Learn more at alivecor.com
StopAfib.org would like to thank Patron attune medical for supporting the Get in Rhythm. Stay in Rhythm.® Atrial Fibrillation Patient Conference
InRhythm™ is a novel way to rapidly deliver flecainide, a well-established antiarrhythmic agent, to the heart via the lungs using a nebulizer.

InRhythm™ is a biopharmaceutical company pioneering a novel approach to treating Paroxysmal Atrial Fibrillation.

InRhythm™ is a novel way to rapidly deliver flecainide, a well-established antiarrhythmic agent, to the heart via the lungs using a nebulizer.

InRhythm’s Potential Advantages*

- **Patient self-administered**, allowing for fast, convenient treatment wherever and whenever AF episodes occur
- **Can be initiated at first signs of an episode**, thus reducing disabling symptoms and possibly avoiding trips to the ER or hospital
- **Rapid conversion** back to normal heart rhythm within minutes
- **Low drug dose** and short duration of action, to minimize potential side effects

*Product is Not Yet FDA-Approved

InCarda is biopharmaceutical company pioneering a novel approach to treating Paroxysmal Atrial Fibrillation.

**Website:** www.incardatherapeutics.com

**Facebook:** www.facebook.com/incardatherapeutics

**Twitter:** www.twitter.com/incardathera

**LinkedIn:** www.linkedin.com/company/incarda-therapeutics
You should march to the beat of your own drum. Your heart shouldn’t.

Atrial fibrillation (AFib) can increase your risk of stroke by 5 times. When there’s an irregular drumming in your chest, it’s important to listen. We’re here to help you navigate AFib with potentially lifesaving support and resources.

Find the tools you need at Heart.org/AFib
The International Waldenstrom’s Macroglobulinemia Foundation (IWMF) is a non-profit support and information organization for individuals with Waldenstrom’s macroglobulinemia (WM). IWMF publishes a quarterly magazine with information about symptoms and treatments, stories of interest, articles about living with the disease and patient education. Comprised of more than 10,000 members, the organization offers a telephone and email service, a network of support groups around the world, and an online discussion forum. IWMF holds an annual Educational Forum for patients and supports a robust research program to fund projects aimed to better understand the disease.
Mended Hearts® is the largest peer-to-peer support organization for cardiovascular disease in the world.

Mended Hearts® offers peer-to-peer support, education, and advocacy to heart patients and their families across the lifespan.

www.mendedhearts.org
www.myheartvisit.org

Knowing can save your life or the life of someone you know.

Know your risk for AFib and be able to recognize signs and symptoms too.

stoptheclot.org
Get to Know Your Heart
NATFonline.org/get-to-know-your-heart

COVID-19 and Atrial Fibrillation
NATFonline.org/afib-and-covid-19

North American Thrombosis Forum
www.NATFonline.org
368 Boylston Street | Brookline, MA 02445 | 617 730 4120

The North American Thrombosis Forum (NATF) is a nonprofit organization dedicated to improving the lives of those affected by blood clots and related diseases. Through our comprehensive resources and innovative programming, we strive to educate patients and healthcare providers about thrombosis and its complications.

What is Atrial Fibrillation?
NATFonline.org/what-is-atrial-fibrillation

Check out these articles related to atrial fibrillation!
NATFonline.org/what-is-atrial-fibrillation
NATFonline.org/get-to-know-your-heart
NATFonline.org/afib-and-covid-19

SELF-GUIDED RESOURCE TOOL
Whether you are focused on reducing your risk for heart disease or have been dealing with the insurance and financial aspects of a cardiac condition for a while, PAF offers self-directed educational resources to provide advice that will make a difference in your life today.

INTERACTIVE CHAT
Designed to provide advice for common medical denial issues & connect you to useful educational materials related to appeals and insurance.

RESOURCE DIRECTORY
Use the Healthy Heart Patient Empowerment Resource Directory to quickly search for resources that can provide direct help and actionable advice for your specific needs.

EXPERT ADVICE
A growing collection of articles, videos, webinars, & more from cardiology experts and health insurance professionals who understand cardiovascular disease.

1 ON 1 ASSISTANCE
Personalized case management support for access to care and affordability challenges. All services provided at no cost to you!

VISIT
patientadvocate.org/mattersoftheheart

This project was developed in conjunction with members of a national cardiovascular coalition. It is managed and updated by Patient Advocate Foundation. This project receives financial support from Amgen and Bristol-Myers Squibb.
Ask our registered nurses your question - for free:
  • Am I at-risk for getting COVID?
  • Should I see a doctor or go to the ER?
  • How can I care for myself during COVID to minimize doctor visits?
  • Or, perhaps something else?

To ask your question, please go to www.virtualpatientcare.org

Are you a woman living with heart disease?

Find your SISTERMATCH for one-on-one support from a woman... who knows.

Learn more at womenheart.org
Atrial Fibrillation Support Forum

First and largest Patient support group on Facebook

www.facebook.com/groups/AtrialFibrillationSupportForum/

16K US and International members

Admins are AFib patients with a research and/or clinical background

Anonymous posting available

Peer-reviewed as a trusted patient resource in Europace Journal December 2015
NOTES
# CONFERENCE EVALUATION AND FEEDBACK

You can fill out this evaluation online at https://www.surveymonkey.com/r/2020GIRvirtual

I am a:  
- [ ] Patient  
- [ ] Family member  
- [ ] Other: ____________________________

If a patient, how long have you had afib? ____________________________

Type of afib:  
- [ ] Paroxysmal/Intermittent  
- [ ] Persistent/Long Standing Persistent

Before this conference, what was your level of knowledge or understanding about the following afib-related areas? (1 = none, 10 = thorough)

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After attending this conference, what is your level of knowledge or understanding about the following afib-related areas? (1 = none, 10 = thorough)

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What were the most valuable things you learned at the conference?  
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
CONFERENCE EVALUATION AND FEEDBACK

What actions do you plan to take as a result of what you learned from the conference?

__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

May we email you in 2–3 months to find out what actions you took because of what you learned from the conference, and your results? Please provide your contact information:

Name: ____________________________________________________________________________________________

E-mail address (please print):  _______________________________________________________________________

Phone number (as backup option):  __________________________________________________________________

Please share your comments about the conference, including program, speakers, etc. ______________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

What should be added, or covered in more detail, at our next conference? Do you have any other suggestions for our next conference? __________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________
__________________________________________________________________________________________________

Would you like to receive the StopAfib.org Newsletter? If so, please share with us your name and email address (please print):  _____________________________________________________________________________

Thank you for watching the Get in Rhythm. Stay in Rhythm.* Atrial Fibrillation Patient Conference and for providing us with this feedback. We hope to see you at the in-person event next year.
Friday, October 30, 2020
Central Daylight Time (CDT)

9:00 AM - 10:00 AM  Opening and Keynote
10:30 AM - 11:00 AM  Break and Visit Sponsors and Doctors
11:00 AM - 12:30 PM  Medications for Afib Patients
12:30 PM - 2:00 PM  Lunch and Visit Sponsors and Doctors
2:00 PM - 3:30 PM  Managing Afib
3:30 PM - 4:00 PM  Break and Visit Sponsors and Doctors
4:00 PM - 4:50 PM  Getting the Best Care Panel Discussion
4:50 PM - 5:30 PM  Resources / Wrap Up

Saturday, October 31, 2020
Central Daylight Time (CDT)

9:00 AM - 10:30 AM  Catheter Ablation Procedures and Tools
10:30 AM - 11:00 AM  Break and Visit Sponsors and Doctors
11:00 AM - 12:30 PM  Catheter Ablation Evolution and Innovation
12:30 PM - 2:00 PM  Lunch and Visit Sponsors and Doctors
2:00 PM - 3:30 PM  Afib Surgery
3:30 PM - 4:00 PM  Break and Visit Sponsors and Doctors
4:00 PM - 6:00 PM  How to Choose the Right Procedure Panel / Wrap Up

Sunday, November 1, 2020
Central Standard Time (CST)

9:00 AM - 11:00 AM  FDA and Digital Health
11:00 AM - 11:30 AM  Break and Visit Sponsors and Doctors
11:30 AM - 1:30 PM  Living with Afib and Takeaways

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PROMOTIONAL PARTNERS

Atrial Fibrillation Support Forum  Lone Atrial Fibrillation Forum