

2024

AUGUST 9-11

Get in Rhythm. Stay in Rhythm.®

Atrial Fibrillation Patient Conference

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StopAfib.org is a non-profit patient advocacy organization that educates and supports those living with atrial fibrillation (afib). The organization was founded in April 2007 by Mellanie True Hills, an atrial fibrillation patient who was afib free due to a procedure.

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 team, and rid the world of afib-related strokes.

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

StopAfib.org Patient Resources

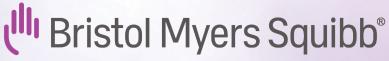
- Get Started Learning About Atrial Fibrillation Guide:
 - https://www.stopafib.org/learn-about-afib/ get-started-learning-about-afib/
- Afib News and Videos: https://www.stopafib.org/afib-news-events/
- Afib Events:
 - https://www.stopafib.org/afib-resources/upcoming-events/
- Patient & Caregiver Resources: https://www.stopafib.org/afib-resources/ patient-and-caregiver-resources/
- Glossary: https://www.stopafib.org/afib-resources/afib-glossary/
- Afib Services Locator: https://www.stopafib.org/find-afib-services/
- Patient Discussion Forum: https://forum.stopafib.org/
- Atrial Fibrillation Blog: https://www.stopafib.org/blog/
- StopAfib Video Library featuring webinars, master classes, and past patient conferences sign up for a free account or access the library: https://www.stopafib.org/afib-resources/videos/
- Social Media:
 - o Facebook: https://www.facebook.com/stopafib
 - o Instagram: https://instagram.com/stopafib
 - o X (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





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Atrial Fibrillation Patient Conference

GENERAL INFORMATION

We are excited to have you here for the **2024 Get in Rhythm.** Stay in Rhythm. Atrial Fibrillation Patient Conference! We are thrilled you are joining us for this powerful, transformative weekend! Please review the information below to make the most of your time at the conference.

CUSTOMER SERVICE

The StopAfib.org Team will be available during all regularly scheduled sessions at the Resource Table at the back of the General Session room (Grand Salon Ballroom). Please let us know if you have any concerns or questions so we can address them.

NAME BADGES

Name badges should be worn during all functions to enter general sessions and meals. Misplaced badges may be replaced at the Resource Table at the back of the Grand Salon Ballroom.

STAYING ON SCHEDULE

Please respect your fellow attendees by being present and in your seat for the start of each session to help ensure we start on time. Announcements in the foyer will alert you to program start times.

ATTIRE

The dress code for the event, including the reception, is business casual. The ballroom WILL be on the cool side. We encourage you to plan accordingly and bring an additional sweater, wrap, or jacket each day.

CELL PHONES

Please turn off all cell phones to avoid unnecessary disruptions.

RECORDING

The Get in Rhythm. Stay in Rhythm. Atrial Fibrillation Patient Conference does not allow audio/video recording in the sessions via phone or recording devices.

INTERNET & COMPUTER USAGE

As a courtesy to your fellow attendees, please do NOT use laptops during the sessions. Internet will not be available in the meeting room. Instead, take advantage of the complimentary Wi-Fi in your quest room.

NETWORKING WITH OUR SPONSORS

Please make a point to meet and thank our sponsors who provide information about products or services to help those living with atrial fibrillation. Sponsor booths are open in the Grand Salon Foyer during breaks and lunch. You can find more information on our sponsors in this Program Book.





GENERAL INFORMATION (cont'd)

MEAL OPTIONS

The conference will provide morning coffee and tea, mid-morning breaks Friday through Sunday, and lunch and mid-afternoon breaks Friday and Saturday. Here is a list of additional food options.

The Urban Spur and Bar is American fare with a local flair, and is open from 6:30 am to 2:00 pm and 5:00 pm to 10:00 pm.

Starbucks is in the hotel lobby, offering a full-service beverage menu and grab-and-go items. Hours of operation are daily from 5:30 am to 1:00 pm.

The hotel currently offers in-room dining for breakfast from 6:00 am to 10:00 am, lunch from 11:00 am to 2:00 pm, and dinner from 5:00 pm to 10:00 pm.

Nearby restaurants include Koriyaki Asian Grill, The Ranch at Las Colinas, Whiskey Cake Kitchen & Bar, Hard Eight BBQ, and many more.

LUGGAGE STORAGE

The guest room checkout time is 11:00 am. Luggage Storage will be available at the bell desk throughout the event.

CONFERENCE EVALUATION

For your convenience, the Conference Evaluation form is available online at https://www.surveymonkey.com/r/GIRSIR2024in-person.

CONFERENCE HASHTAG #StopAfib24





StopAfib.org would like to thank Silver Sponsor



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Get in Rhythm.
Stay in Rhythm.

Atrial Fibrillation Patient Conference

Medtronic

Restoring life's rhythm. With more. For more.

Visit the Medtronic booth to learn more about AFib treatment and heart monitoring solutions.



AGENDA

FRIDAY, AUGUST 9, 2024 All times are Central Daylight Time (CDT)

8:30 AM-10:00 AM Opening and Managing Afib

• Welcome and Introduction—Mellanie True Hills, CSP

• What to Know About Afib and Lifestyle—Emelia Benjamin, MD

• Which Drug for Afib Rate vs. Rhythm Control—Francis Marchlinski, MD

• Q&A

10:00 AM-10:30 AM Break and Visit Sponsors

10:30 AM-12:00 PM Managing Afib Along with Other Issues

• Dealing With Other Heart Issues—Eric Prystowsky, MD

• Dealing With Afib With Other Issues—Andrea Russo, MD

• Q&A

12:00 PM-1:30 PM Lunch (provided) and Visit Sponsors

1:30 PM-3:00 PM Preventing Afib Strokes

• Medications For Preventing Strokes—Jeff Healey, MD

• Devices for Preventing Afib Strokes—Dhanunjaya Lakkireddy, MD

Q&A

3:00 PM-3:30 PM Break and Visit Sponsors

3:30 PM-4:30 PM The Evolution of Afib Surgery

• The Evolution of Afib Surgery—James Cox, MD

Q&A

4:30 PM-5:00 PM Resources and Closing—Mellanie True Hills, CSP

5:00 PM-6:30 PM VIP Reception



AGENDA

SATURDAY, AUGUST 10, 2024 All times are Central Daylight Time (CDT)

8:30 AM-10:00 AM Afib Surgery Updates

• What Should Patients Know About Minimally Invasive Surgery?—Randall Wolf, MD

• What Should Patients Know About Hybrid/Convergent Ablation?—Randy Lee, MD

Q&A

10:00 AM-10:30 AM Break and Visit Sponsors
10:30 AM-12:00 PM Catheter Ablation Updates

• Catheter Ablation for Afib—Jodie Hurwitz, MD

• Pulsed Field Ablation for Afib—Moussa Mansour, MD

Q&A

12:00 PM-1:30 PM Lunch (provided) and Visit Sponsors

1:30 PM-3:00 PM Looking Toward the Future

• Role of Quality of Life in Guiding Afib Ablation—Andrea Russo, MD

• Future of Afib Research and Treatment—Jeanne Poole, MD

Q&A

3:00 PM-3:30 PM Break and Visit Sponsors

3:30 PM-4:20 PM New Afib Guidelines

• What Patients Should Know About the New Afib Guidelines—Jose Joglar, MD

Q&A

4:20 PM-5:00 PM Research and Closing—Mellanie True Hills, CSP

SUNDAY, AUGUST 11, 2024 All times are Central Daylight Time (CDT)

8:30 AM-10:00 AM Patient-Focused Afib Research

 Including the Patient Voice in Research: From Citizen Science to Clinical Studies—Bianca Brundel, PhD

• Capturing Individual Insights for Patient-Tailored Afib Management—Myrthe Kuipers

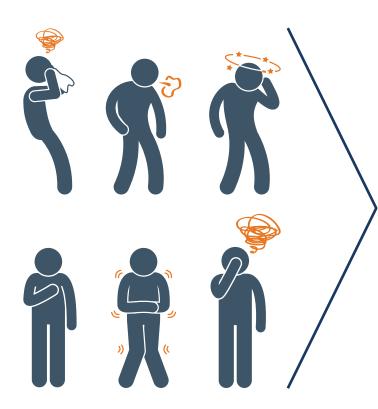
• Q&A

10:00 AM-10:30 AM Break and Visit Sponsors

10:30 AM-12:00 PM Living with Afib, Takeaways, and Closing—Mellanie True Hills, CSP



Suffering from Advanced Atrial Fibrillation?



Long-Standing Persistent AF Symptoms:

- Shortness of breath
- Dizziness
- Weakness
- Fatigue
- Lowered blood pressure
- Pain or pressure in the chest
- · Rapid or irregular heartbeat

Stop by the AtriCure booth to learn about the ONLY FDA approved minimally invasive device for Advanced Atrial Fibrillation



Learn more about the benefits of Hybrid AF Therapy www.HybridAFTherapy.com

ERIC N. PRYSTOWSKY, MD ADVOCATE FOR PATIENTS AWARD

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

Dr. Eric N. Prystowsky, an electrophysiologist at St. Vincent Indianapolis, was the first recipient of the Advocate for Patients Award in 2013.

He was selected because he has played an important role in getting the afib patient community a seat at the table. Hence, our concerns, wants, and needs are considered in decisions about our care. 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 arranged for patient organizations to receive free exhibit booths at the annual medical conference to connect with electrophysiologists and other healthcare professionals.
- Brought afib patients to speak at medical conferences so doctors and nurses would understand the patient's perspective and better treat us.
- Took the patient perspective to guidelines committees so our treatment would be patientfocused.
- Engaged patients in think tanks and advisory boards to influence decisions about our care.

Dr. Prystowsky is the most sought-out afib expert at global medical conferences. In addition, he is a prolific contributor to research and treatment literature. He co-authored two textbooks, published more than 780 articles, sat on numerous guidelines committees and think tanks, serves on the editorial boards of 8 journals, and was Editor-in-Chief of the highly-prestigious *Journal of Cardiac Electrophysiology* for 15 years.

Additionally, Dr. Prystowsky and StopAfib.org have campaigned together to preserve the brain by helping patients and doctors understand the role of sinus rhythm in preventing afib-related strokes.

At the Get In Rhythm. Stay In Rhythm.® Atrial Fibrillation Patient Conference in 2016, the award was renamed in his honor. We bestow the Eric N. Prystowsky, MD Advocate for Patients Award on a very deserving healthcare professional each year.

Subsequent award recipients are:

2017: Andrea Natale, MD

2018: Doug Packer, MD

2019: Hugh Calkins, MD

2020: Frank Marchlinski, MD

2021: Emelia Benjamin, MD

2022: Vivek Reddy, MD

2023: Andrea M. Russo, MD



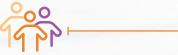


Delaying A Catheter Ablation Procedure Can Be Detrimental To Your Health.



What may happen if AFib is left untreated?

1in 5 Patients progress in 1 year.



From Paroxysmal

(Occasional) AFib

To Persistent



- 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.2 If left untreated, these symptoms may get worse.
- ▶ Your risk of stroke and heart failure is 5x greater.^{1,2}



Catheter ablation is a safe and effective way to treat AFib when medications don't work or cause negative side effects.²



Often performed as an outpatient procedure



12 month post-procedure success rates for catheter ablation for AFib are about 80%4*



May improve quality of life and reduce symptoms²



May alleviate the need to take medication

To learn more and find a heart arrhythmia doctor, or Electrophysiologist, near you, visit www.getsmartaboutafib.com

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.

"In studies, success defined as freedom from any atrial arrhythmia (atrial fibrillation, atrial flutter, atrial tachycardia) 12 months post-procedure when operator remained in the preset contact force range. Further sub-analysis showed that when the contact

force was within investigator-selected range 85% of time, success was increased by 21% to 88% (85%: n=32; 85%: n=73).

1. Atrial fibrillation and risks of cardiovascular disease, rend disease, and death: systematic review and metaanalysis. The BMJ website. Published September, 6 2016. Accessed May 19, 2020

2. Hugh Calkins, Gerhard Hindricks, Ricardo Cappato, et al. 2017 HRS/EHRA/ECAS/APHRS/SOLAECE expert consensus statement on catheter ablation and surgical ablation of atrial fibrillation. 2017

3. Schnabel R, Pecen L, Engler D, Lucerna M, Sellal JM et al. (2018) Atrial fibrillation patterns are associated with arrhytt 4. Natale A, Reddy VY, Monir G, Wilber DJ, Lindsay BD, McElderry HT, Kantipudi C, Mansour MC, Melby DP, Packer DL, 1 SMART-AF trial. Journal of the American College of Cardiology; 2014 Aug 19:64(7):647-56. Biosense Webster, Inc., THERMOCOOL SMARTTOUCH" SF Uni-Directional Navigation Catheter Instructions For Use M5276-787XC

THERMOCOOL* Navigation Catheters are indicated for the treatment of drug refractory recurrent symptomatic paroxysmal atrial fibrillation, when used with CARTO* 3 Systems (excluding NAVISTAR* RMT THERMOCOOL* Catheter). Important information: Prior to use, refer to the instructions for use supplied with this device for indications, contraindications, side effects, warnings and precautions

Caution: US law restricts this device to sale by or on the order of a physician.
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- Get tailored educational material and tools
- Record daily activities in your AFibLife journal
- Monitor your medication compliance
- Integrate health data from your Apple watch or other smart device*
- Complete the AF Effect On Quality-Of-Life Questionnaire (AFEQT) to track how AFib may be effecting your quality-of-life**





For more resources, visit www.afanswers.com



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). In addition, 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 the quality of life of those living with afib, and enhance communication with healthcare 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 awarenessraising 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 member of the Editorial Board of the Cardiovascular Digital Health Journal and a regular contributor on patient perspectives to medical publications. She 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





Emelia Benjamin, MD, ScM

Dr. Benjamin is a Boston University Professor of Medicine and Epidemiology and is a foremost international expert on the epidemiology of atrial fibrillation (AF). She co-leads the National Heart Lung and Blood Institutes AF Research Working Group, defining future research directions. A Framingham Study investigator, she has been NIH funded since 1998 on grants related to AF, vascular function,

inflammation, mobile health, and chronic pain.

She has published >800 peer-reviewed articles and is a Clarivate Highly Cited Researcher since 2014 (h index=198). She was inducted into the Association of American Physicians in 2021. She has volunteered for the American Heart Association (AHA) since the 1990s and has led diverse research fellowships for the AHA since 2013.

She is the inaugural Associate Provost for Faculty Development, Boston University Medical Campus and co-designed and facilitates multiple longitudinal faculty development programs. She has won national awards for research, education, mentoring, and diversity, including the Alliance for Academic Internal Medicine's 2020 Diversity and Inclusion Award.

She was the 2021 recipient of the Eric N. Prystowsky, MD Advocate for Patients Award from StopAfib.org.

Twitter: @EmeliaBenjamin







Bianca Brundel, PhD

Bianca Brundel received her PhD from the University Medical Center Groningen, the Netherlands and was trained in molecular and cellular biology (VU, Amsterdam) and clinical pharmacology (UMCG). Since 2016, Bianca is a professor at the physiology department at the Amsterdam UMC, location VU University Medical Center.

Her research is focused on the molecular

mechanisms driving proteostasis derailment and pathophysiology of cardiac diseases, including atrial fibrillation and cardiomyopathies. Molecular findings are used to identify novel druggable targets. Her laboratory utilizes experimental cardiomyocyte and Drosophila cardiac disease models in combination with genetic and pharmacological manipulations. The research of Dr.Brundel contributed to forwarding candidate drugs into (pre-) clinical proof-of-principle studies.

She is project leader of CIRCULAR, a project based on co-creation with Afib patients and StopAfib.org, which recently received funding from the Dutch government. Moreover, she is lead author of the *Nature Disease* Primer 'Atrial Fibrillation' with Mellanie True Hills and others and is founder of the Atrial Fibrillation Innovation Platform to promote translational studies in collaboration with patients, researchers, and health professionals.

Twitter: @bbrundel







James L. Cox, MD

Dr. Cox was trained and served on the faculty at Duke University, Durham, NC, but spent the majority of his career as the first Evarts A. Graham Professor of Surgery, Vice-Chairman of the Department of Surgery, and Chief of the Division of Cardiothoracic Surgery at Washington University School of Medicine and Barnes Hospital in St. Louis, Missouri.

While there, he recruited faculty that ultimately included 6 AATS Presidents, 2 STS Presidents, and the Director of the American Board of Thoracic Surgery. He has trained many prominent surgeons in America, Europe, and Asia, including 34 Residents or Clinical Fellows who became full Professors of Surgery, 30 of whom became Chiefs of Cardiac and/or Thoracic Surgery at their respective institutions. Dr. Cox has served as the Visiting Professor, Featured Lecturer, or Guest Operating Surgeon over 700 times

and in some 30 countries. He has published over 400 peer-reviewed scientific articles and over 400 scientific abstracts and holds some 35 patents on medical devices.

Dr. Cox was the 81st President of the American Association for Thoracic Surgery (AATS), Chairman of the Residency Review Committee for Thoracic Surgery, a Director of the American Board of Thoracic Surgery, a member of the Surgical Study Section at the National Institutes of Health, a Founding Member of the Board of Directors of CTSNet, Editor-in-Chief of two AATS journals, and a member of the Editorial Board of over 20 scientific journals.

Dr. Cox is best known for his work in the field of cardiac arrhythmia surgery and the development of the Cox-Maze Procedure for the treatment of atrial fibrillation. He is the only surgeon ever to receive the Distinguished Scientist Awards from the AATS, the STS, and the HRS, and is the only American cardiac surgeon in the Russian Academy of Science. In 2000, Dr. Cox was designated by the University of Paris as the youngest of only 29 "Pioneers" in the first half-century of the specialty of Cardiothoracic Surgery (1950-2000). Dr. Cox is the 2020 recipient of the Jacobson Innovation Award from the 124-year-old, 82,000-member, American College of Surgeons, their highest scientific honor, which has been awarded to only two other cardiac surgeons.

Dr. Cox is currently Professor of Surgery and Surgical Director of the Center for Heart Rhythm Disorders at Northwestern University in Chicago, a Senior Consultant to four medical device companies, and a member of the Board of Directors of three companies.





Dr. Healey was the lead author of the ASSERT trial that demonstrated the increased stroke risk associated with sub-clinical atrial fibrillation (*New England Journal of Medicine* 2012), and the principal investigator of the ARTESIA trial, which demonstrated that anticoagulation with apixaban reduced the risk of stroke in patients with sub-clinical atrial fibrillation (*New England Journal of Medicine* 2023). He is also the principal investigator of the LAAOS-4 trial, evaluating the role of left atrial appendage occlusion on top of NOAC therapy for prevention of stroke in high-risk individuals with atrial fibrillation.

Jeff Healey, MD, FHRS

Dr. Jeff Healey is a Cardiologist and Electrophysiologist and Professor of Medicine at McMaster University. He is Yusuf Chair and Director of Cardiology at McMaster University. He is the chair of the Canadian Stroke Prevention and Intervention Network (CSPIN) and past chair of the Canadian Atrial Fibrillation guidelines committee. He is also on the steering committee of the international AF Screen organization.





Jodie Hurwitz, MD, FHRS

Dr. Jodie Hurwitz is currently a partner with North Texas Heart Center in Dallas.

Dr. Hurwitz is a graduate of Mt Holyoke College in Massachusetts. She received her MD degree at Albert Einstein College of Medicine in NY. She was an intern/resident at Parkland Hospital in Dallas and completed her cardiology/electrophysiology training at Duke University.

She joined the faculty of the Hospital of the University of Pennsylvania from 1990–1993 and then returned to Dallas to join North Texas Heart Center. She has been there for 26 years and is Head of the Device Clinic there. She has been Chair of Electrophysiology at Medical City Dallas since 1993. She is currently Chair of Cardiology there as well.

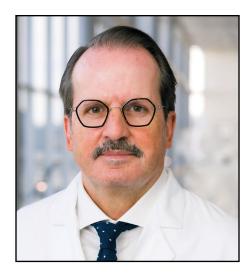
She has been President of the North Texas EP Society for the last 10 years. She is the Past President of the Heart Rhythm Society and is currently on the board of the Writing Committee for Clinical Electrophysiology for the American Board of Internal Medicine.

She has a daughter and loves practicing electrophysiology.

Twitter: @jhurwitz55







Jose Joglar, MD, FHRS

Dr. Joglar currently holds the rank of Professor of Internal Medicine at UT Southwestern Medical Center, where he also serves as Vice Chair for Clinical Affairs at Parkland Health, Program Director of the Electrophysiology Fellowship program, Director of EP Lab at Parkland Health, and holder of the Elizabeth Thaxton and Ellis Batten Page Professorship in Cardiac Electrophysiology Research.

Dr. Joglar has had an extensive academic career. As such, he has participated extensively in research, education, editorial boards, national committees, and currently serves as the editor of the ECG section at *Circulation*. Dr. Joglar has also authored numerous manuscripts, including original research, editorials, and statements on a variety of clinical arrhythmia and device topics.

His main academic interest has centered in development of clinical practice guidelines. He has been a past member of the ACC/AHA Joint Committee for Clinical Practice Guidelines and has been a member of the writing committees for 6 guidelines, including the chair of the writing committee for the 2023 Atrial Fibrillation guideline.





After working in the field of digital communication for over 6 years, she now investigates how online communication can impact collaboration between patients, family members, and healthcare professionals.

Twitter: @MyrtheFreya

Myrthe Kuipers

Myrthe Kuipers is doing her PhD in Marketing at the University of Amsterdam in the Netherlands. She is co-founder of the AFIP (Atrial Fibrillation Innovation Platform) Foundation, which is an initiative that empowers Afib patients to take charge over their own health by joining forces with professionals to develop Afib solutions.





Dhanunjaya Lakkireddy, MD, FHRS

Dr. Dhanunjaya (DJ) Lakkireddy is the Executive Medical Director of the Kansas City Heart Rhythm Institute at HCA Midwest and a Professor of Medicine at the University of Missouri. He is board certified in Cardiology and Electrophysiology, and is an internationally-renowned electrophysiologist whose contributions have helped advance the field.

Dr. Lakkireddy is one of the most creative and productive physician scientists with more than 350 peer reviewed articles and abstracts to his credit. His enthusiasm for clinical research in the field of electrophysiology and cardiology is boundless. He has been the primary investigator for over 100 investigator initiated studies and industry sponsored trials that have expanded the scope of clinical practice in cardiology and electrophysiology.

He was the lead investigator of the 'YOGA MY HEART' study, internationally recognized for its innovation in exploring alternative medical strategies as a supplement to standard medical therapy. He received the Prevention Award for the year 2011 for his contributions to cardiovascular health by *Prevention* magazine. He was recognized by Ingram's magazine with a "Heroes in Medicine" award in 2014.

Dr. Lakkireddy is an integral part of numerous scholarly projects and is an engaging teacher and mentor.

His dedication to excellence in patient care is a source of great motivation for physicians in training. He is an invited speaker at several national and international meetings. He is credited with shepherding several new tools and techniques to the Midwest area. His pioneering works in the fields of atrial fibrillation, ventricular tachycardia, remote magnetic navigation, and alternative therapies for the treatment of atrial fibrillation have paved the way for future research. He is a pre-eminent scientist in the field of Left Atrial Appendage and Atrial Fibrillation research.

Dr. Lakkireddy is the Program Director for the Kansas City Heart Rhythm Symposium. This is designed to provide education to Physicians, Nurses, Nurse Practioners and lab staff in the field of heart rhythm disorders for the surrounding eight states. He is co-director for "International Symposium on Left Atrial Appendage" focused on the frontier science of left atrial appendage. This topic is of tremendous interest in the practice of cardiovascular care. The symposium offers very informative presentations on the anatomy, physiology and pathological aspects of the left atrial appendage along with old and new therapeutic strategies of stroke prophylaxis including cardiac devices for LAA exclusion.

He is the founder for Global Atrial Fibrillation Alliance, a not for profit patient-physician-industry alliance working towards a common goal of creating a world free of atrial fibrillation. He was instrumental in inaugurating the World AF Awareness Day and AF run that is held worldwide on the second Saturday of September every year.

Dr. Lakkireddy is the associate editor for the reputable online open access arrhythmia journal that is released bi-monthly—*The Journal of Atrial Fibrillation* (www.jafib.com). He is the sitting Governor for the Kansas Chapter of American College of Cardiology (ACC). He is an active member of the ACC steering committee for the Board of Governors, Population Council and EP Leadership Council. He sits on various editorial boards for peer reviewed journals and numerous steering committees.

Twitter: @DJ_Lakkireddy







Randy Lee, MD

Dr. Lee is a Cardiologist and a Cardiac Electrophysiologist who specializes in the treatment of arrhythmias and prevention of stroke. He is interested in improving outcomes of catheter ablation of complex arrhythmias such as atrial fibrillation and ventricular tachycardia, and is actively involved in the development of tools and

techniques to improve ablation procedures. Along with his cardiovascular surgery colleagues, he has developed new hybrid epicardial/endocardial procedures that have demonstrated improved efficacy in persistent atrial fibrillation patients who have previously failed catheter ablation. He has pioneered devices for stroke prevention and initiated device-based therapies for stroke prevention at UCSF.

In addition to the development of devices and techniques for the treatment of arrhythmias and embolic stroke prevention, Dr. Lee has an active cardiac tissue engineering laboratory for myocardial repair/reconstruction. His research focuses on cellular and molecular aspects of cardiac arrhythmias and vascular regeneration, as well as in situ tissue engineering approaches for the treatment of heart failure and arrhythmias.





Moussa Mansour, MD, FHRS

Moussa Mansour, MD, is Professor of Medicine at Harvard Medical School. He is also the Clinical Director of the Demoulas Center for Cardiac Arrhythmias, Director of the Atrial Fibrillation Program, and the Jeremy Ruskin and Dan Starks Endowed Chair in Cardiology, at Massachusetts General Hospital.

Dr. Mansour's clinical and research interest focuses on atrial fibrillation and his aim is to enhance the understanding of this disease and improve the quality of care of patients suffering from it. He has pioneered the use of new techniques and technologies aiming at making ablation for atrial fibrillation safer and more effective.

Dr. Mansour is also an active clinical consultant in all aspects of heart rhythm disorders, including atrial fibrillation, ventricular tachycardia, supraventricular tachycardia, bradycardia and other abnormal rhythms. Dr. Mansour performs a large number of catheter ablation procedures and implants pacemakers and defibrillators to treat different arrhythmias.

Dr. Mansour has published extensively in the field of cardiac arrhythmia, specifically the area of atrial fibrillation. He is involved in cutting edge research and participates in the development of new catheters and techniques for the ablation of atrial fibrillation. Most recently he has been heavily involved in investigating pulsed-field ablation for atrial fibrillation, which is novel technology that has the potential to make ablation for atrial ablation safer and more effective.

In addition to catheter ablation, Dr. Mansour is an expert in the occlusion of the left atrial appendage using tools such as the Watchman devices for stroke prevention in patients with atrial fibrillation. He is involved in studies investigating new generations of this device that are safer and more effective.

Twitter: @MoussaMansour10





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 and the Director of Electrophysiology at the University of Pennsylvania Health Care System.

Dr. Marchlinski is a graduate of the University of Pennsylvania Medical School. He completed his postdoctoral internal medicine residency and cardiology and 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 550 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 and regional and international EP symposia, and has received numerous teaching awards at the University of Pennsylvania.

He was the 2020 recipient of the Eric N. Prystowsky, MD Advocate for Patients Award from StopAfib.org.





Jeanne Poole, MD, FHRS

Dr. Jeanne Poole is a Professor of Medicine at the University of Washington where she has practiced clinical electrophysiology and had a robust research career. She was the former Section Head of the Arrhythmia/ Electrophysiology service for over 20 years. She has been very involved in the Heart Rhythm Society, serving on the Board of Trustees and as the current Editor-In-Chief for the HeartRhythm O2 Journal. She is a noted speaker at conferences both nationally and internationally addressing broad topics of arrhythmia care.

Her research career has been focused on the treatment and prevention of arrhythmias, including both atrial and ventricular tachyarrhythmias. She has been a principal investigator (PI) or Co-PI for several large NIH/NHLBI studies: The sudden cardiac death in heart failure trial (SCD-HeFT), the Home automatic defibrillator trial (HAT), and the catheter ablation versus antiarrhythmic drug therapy trial (CABANA). In addition, she has led many other important trials addressing arrhythmia care.

She has been a champion for women with heart disease, promoting the need to enroll adequate numbers of women into clinical trials to fairly understand the benefit of contemporary arrhythmia therapies. As Co-Pl of the ongoing BIO\LIBRA trial for which she is the National Co-Pl, they were able to enroll 48% women, more than any other trial examining the benefit of implantable defibrillators in patients with heart failure. She is a member of the scientific advisory board for the WomenHeart organization. Dr. Poole has also been a staunch supporter of women seeking a career in Electrophysiology.





Eric N. Prystowsky, MD, FHRS

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 St. Vincent in 1988 and is Director of the Cardiac Arrhythmia Service. He has been Consulting Professor of Medicine at Duke University Medical Center since 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 780 publications concerning cardiac arrhythmias. He was the Editor-in-Chief of The Journal of Cardiovascular Electrophysiology for 15 years and currently serves on 8 editorial boards.

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 is the recipient of the Distinguished Alumni Award from Pennsylvania State University (2007), the Distinguished Physician Award from St. Vincent Hospital (2014), the HRS Distinguished Teacher Award (2002), President's Award (2009), and Pioneer in Cardiac Pacing and Electrophysiology Award (2018).

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.

Twitter: @EPrystowskyonEP







Andrea Russo, MD, FHRS

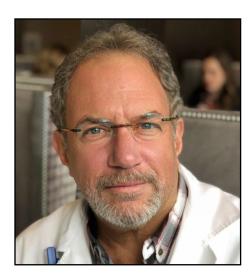
Dr. Russo is Professor of Medicine at Cooper Medical School of Rowan University, Director of Electrophysiology and Arrhythmia Services, and Director of the Clinical Cardiac Electrophysiology Fellowship Program at Cooper University Hospital in Camden, New Jersey.

She is a recent Past President of the Heart Rhythm Society (HRS) and is a current member of the HRS Board of Trustees. She has authored multiple manuscripts on a variety of arrhythmia and device topics and has been co-chair or member of various writing groups, including guidelines, consensus, and appropriate use documents. Areas of special interest include sex differences in arrhythmias, implantable cardioverter defibrillators, atrial fibrillation therapy, and the role of digital health on arrhythmia management.

She was the 2023 recipient of the Eric N. Prystowsky, MD Advocate for Patients Award from StopAfib.org.

Twitter: @AndreaRussoEP





Randall Wolf, MD

Dr. Randall Wolf graduated from Indiana University School of Medicine and shortly after became a surgical innovator who pioneered a minimally-invasive procedure for the surgical treatment of lone Atrial Fibrillation. He 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.

Dr. Wolf has served as Co-Director, International AFIB Center of Excellence at the Indiana Heart Hospital and Afib Clinic at Memorial Hermann Hospital.

Currently, he is the Arrhythmia Specialist at Houston Methodist DeBakey Heart & Vascular Center and Houston Methodist Hospital. He has also served as President of both the International Society of Minimally Invasive Cardiothoracic Surgery (ISMICS) and the 21st Century Cardiothoracic Surgery Club and was the inaugural co-editor of the *Innovations Journal*.

Dr. Wolf has performed over 3000 Wolf minimaze procedures and demonstrated the procedure to heart surgeons worldwide. He has been Visiting Professor in 18 countries, including Oxford University, University of Tokyo, and Peking University. He has delivered hundreds of invited lectures at hospitals, academic meetings, and seminars and has over 100 peer-reviewed papers and textbook/chapters.

Twitter: @RandallWolfMD









YOU ARE NOT ALONE.

People with atrial fibrillation (AFib) are 5X more likely to have a stroke. Managing high blood pressure and AFib can dramatically reduce your chances of having a stroke.

AFib affects millions of Americans – both patients and loved ones who care for them. Resources are available to better help manage your AFib including an online community for people living with AFib and their loved ones.

For a complete list of resources visit heart.org/AFib.

Resources include:

- Shared Decision-Making for People Living With AFib
- AFib Symptom Tracker
- Medication Tracker
- Meet the AFib Care Team
- Living With AFib Guide
- Partnering in Your Treatment: Questions to discuss with your doctor about your options and goals



The American Heart Association and StopAfib.org are collaborating to support patients with atrial fibrillation.



CONNECT WITH PEOPLE WHO CARE

Get the support you need by connecting online with others who are living with AFib. The **MyAFibExperience**® is a place where people can share their real stories and manage a real difference in people's lives. Patients and caregivers may feel alone, confused, scared, depressed, and overwhelmed. The unique online community offers advice, encouragement, and reliable helpful information at your fingertips whenever you need it. Signing up is easy and membership is free.

MyAFibExperience® can help you navigate your journey. Some frequently asked questions include:

- · What can I do to manage my AFib?
- · How does my AFib impact my risk for stroke?
- · How can I make him feel better?
- How can I give her hope?
- · Do others with AFib feel this way too?

HCA Healthcare FOUNDATION

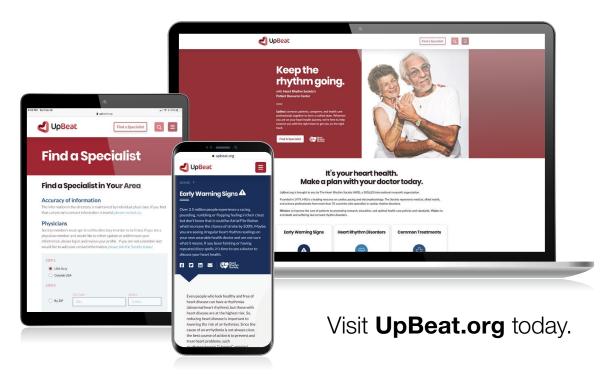
The HCA Healthcare Foundation is the $\$ national sponsor of Getting to the Heart of Stroke $^{\rm M}$.

To learn more and sign up, visit MyAFibExperience.org



For Patients. For Caregivers.

A Trusted Resource For You.



Are You UpBeat?

The Heart Rhythm Society is proud to offer UpBeat, a patient and caregiver resource designed to empower, educate, and inspire. Because UpBeat is brought to you by HRS, you can trust it will serve as a dependable resource.

Head to **UpBeat.org** for expert information about heart rhythm disorders, early warning signs, treatments, lifestyle, and more.





ACRONYM LIST

Acronym	Definition	Acronym	Definition	
AA	Atrial arrhythmia	CBD	Cannabidiol	
AAD	Antiarrhythmic drug	CCS	Canadian Cardiovascular Society	
AC	Anticoagulant	CFAE	Complex fractionated atrial electrogram	
ACC	American College of Cardiology	CHA ₂ DS ₂ -VASc	Afib stroke risk score (1 point each, 2 points when	
ACEI	Angiotensin-converting enzyme inhibitors		noted): C=congestive heart failure; H=high blood pressure; A_2 =age 75 or more; D=diabetes mellitus; S_2 =stroke; V=vascular disease; A=age 65-74;	
ACP	Amplatzer Cardiac Plug			
AFL	Atrial flutter		Sc=sex /female	
AHA	American Heart Association	CHD	Coronary heart disease	
AHI	Apnea-hypoxia index or apnea-hypopnea index	CHF	Congestive heart failure	
Al	Artificial intelligence	Cl	Confidence interval	
ANP	A-Type natriuretic peptide or	CKD	Chronic kidney disease	
	atrial natriuretic peptide	CM	Cardiomyopathy	
ANS	Autonomic nervous system	CMC	Circular mapping catheter	
APC	Atrial premature complexes	CNS	Central nervous system	
APD	Antiplatelet drug	CO	Carbon monoxide	
APD	Action potential duration	CO2	Carbon dioxide	
ARB	Angiotensin receptor blockers	Co-PI	Co-principal investigator	
ARIC	Atherosclerosis Risk in Communities Study	COPD	Chronic obstructive pulmonary disease	
ARP	Atrial refractory period	CPAP	Continuous positive airway pressure	
ASA	Acetyl salicylic acid/aspirin	СРВ	(treat sleep apnea) Cardiopulmonary bypass	
ASV	Adaptive servo-ventilation	CrCl		
AT/ATA	(treat central sleep apnea)	CRF	Creatinine clearance (kidney function)	
AUC	Atrial tachyarrhythmia/tachycardia Area under the curve	CRP	Cardiorespiratory fitness	
AV	Atrioventricular	CKF	C-reactive protein	
		CSA	Coronary sinus	
BID/bid	Twice daily	CSA	Central sleep apnea	
BiPAP	Bilevel positive airway pressure (treat sleep apnea)	CTA	Computerized tomography (also CAT scan) Computed tomographic angiography	
BMI	Body mass index	CTI		
BNP	B-Type natriuretic peptide or brain natriuretic peptide		Carding and I for the card	
ВР	Blood pressure	CV	Cardiovascular (heart)	
BTS	Bradycardia-Tachycardia Syndrome	CVA	Cerebrovascular accident or stroke	
CA	Catheter ablation	CVD	Cardiovascular disease (heart disease)	
CABG	Coronary artery bypass graft (open-heart bypass	CVE	Cardiovascular event	
	surgery)	CVRCO2	Cerebrovascular carbon dioxide reactivity	
CAD	Coronary artery disease	CW	Chicken wing	
CAM	Complementary alternative medicines	CXR	Chest X-ray	
CAST	Cardiac Arrhythmia Suppression Trial	DB	Double-blind	
		DCCV	Direct current cardioversion	



ACRONYM LIST (cont'd)

Acronym	Definition	Acronym	Definition
DE-MRI	Delayed Enhancement-Magnetic	GP	Ganglionic plexi
	resonance imaging	GWAS	Genome-wide association studies
DF	Dominant Frequency	HC	Healthy controls
DM	Diabetes mellitus	HF	Heart failure
DMC	Data Monitoring Committee	HFpEF	Heart failure with preserved ejection fraction
DOAC	Direct-acting oral anticoagulant (Xarelto, Eliquis, Pradaxa, Savaysa)	HFrEF	Heart failure with reduced ejection fraction
DOE	Dyspnea on exertion	HIFU	High-intensity focused ultrasound
DPP-4i	Dipeptidyl peptidase 4 inhibitor	HPSD	High power short duration
DRT	Device related thrombus	HR	Hazard ratio
DSMB	Data Safety Monitoring Board	HR	Heart rate
DVT	Deep vein thrombosis (clot)	HRS	Heart Rhythm Society
Dx	Diagnosis	HSAT	Home sleep apnea test
EAM	Electroanatomic mapping	HSP	Heat shock protein
EAT	Epi adipose tissue	HT or HTN	Hypertension/high blood pressure
ECG/EKG	Electrocardiogram	Hx	History
ECGI mapping	Electrocardiographic imaging	ICD	Implantable cardioverter defibrillator
ECV	Electrical cardioversion	ICE	Intracardiac echocardiography
EEG	Electroencephalogram	ICH	Intracranial hemorrhage
EF	Ejection fraction	IDE	Investigational device exemption (FDA)
EGM	Electrogram	ILD	Interstitial lung disease
EMG	Electromyelogram	ILR	Implantable loop recorder
EOG	Electrooculogram	ILRS	Implantable loop recorder system
EOS	End-of-study	INR	International normalized ratio
EP	Electrophysiologist	IPH	Intraparenchymal hemorrhage
ER	Event rate	iPSC	Inducible pluripotent stem cell
ERP	Effective refractory period	IR	Incidence rate
ETOH	Ethyl alcohol	IRAF	Immediate reinitiation of atrial fibrillation
EVOO	Extra virgin olive oil	IRB	Institutional Review Board
FDA	US Food and Drug Administration	ISMICS	International Society for Minimally Invasive Cardiothoracic Surgery
FH	Family history	ITT	Intention to treat
FU	Follow up	IV	Intravenous
FXa	Factor 10a inhibitor	IVC	Inferior vena cava
FXI	Factor 11 inhibitor	K	Potassium
GDMT	Guideline directed medical therapy/treatment	LA	Left atrium
GFR	Glomerular filtration rate (for kidney disease)	LAA	Left atrial appendage
GGA	Geranylgeranylacetone	LAAC	Left atrial appendage closure
GLP-1	Glucagon-like peptide-1		



ACRONYM LIST (cont'd)

Acronym	Definition	Acronym	Definition				
LAAEI	Left atrial appendage electrical isolation	NHLBI	National Heart, Lung, and Blood Institute				
LAA-FV	Left atrial appendage flow volume		(of the NIH)				
LAAI	Left atrial appendage isolation	NI	Natural intelligence				
LAAO	Left atrial appendage occlusion	NIH	National Institutes of Health (of US Department of Health & Human Services)				
LAAOS	Left Atrial Appendage Occlusion Study	NO2	Nitrogen dioxide				
LAV	Left atrial volume	NOAC	Novel oral anticoagulant (Xarelto, Eliquis,				
LICU	Low-intensity collimated ultrasound		Pradaxa, Savaysa)				
LINQ	Reveal insertable cardiac monitor (Medtronic)	NPV	Non-pulmonary vein				
LIPV	Left inferior pulmonary vein	NR	Nonrandomized				
LMWH	Low molecular weight heparin	NSR	Normal sinus rhythm				
LOE	Level of evidence	NSVT	Nonsustained ventricular tachycardia				
LRFM LS	Lifestyle risk factor management	OAC	Oral anticoagulation (especially coumadin or warfarin)				
LSP	Longstanding	OD/od	Once daily				
	Longstanding persistent	OHS	Open-heart surgery				
LSPV	Left superior pulmonary vein	OPCAB	Off-pump coronary bypass surgery				
LUPV LV	Left upper pulmonary vein Left ventricular	OR	Odds ratio				
LVEF		OSA	Obstructive sleep apnea				
LVEF	Left ventricular ejection fraction Left ventricular function	OSAS	Obstructive sleep apnea syndrome				
LVF		P (value)	Probability (calculation)				
MCOT	Left ventricular hypertrophy	PAC	Premature atrial contractions				
	Mobile cardiac outpatient telemetry	PAF	Paroxysmal AF				
MCT	Mobile cardiac telemetry	PAP	Positive airway pressure (treat sleep apnea)				
mEHRA	Modified European Heart Rhythm Association (AF Symptom Classifications)	PCI	Percutaneous coronary intervention or stent				
MET	Metabolic equivalent	PCORI	Patient-Centered Outcomes Research Institute				
Mg	Magnesium	PER	Persistent				
MI	Myocardial infarction (heart attack)	PFA	Polyunsaturated fatty acids (Omega-3s)				
MIDCAB	Minimally invasive direct coronary artery	PFA	Pulsed field ablation				
	bypass	PI	Principal investigator				
ML	Machine learning	PLA	Posterior of the left atrium				
MRI	Magnetic resonance imaging	PLAATO	Percutaneous left atrial appendage				
N	Number of participants	DOAE	transcatheter occlusion device				
Na	Sodium	POAF	Post-operative AF				
NASPE	North American Society of Pacing & Electrophysiology (HRS predecessor)	PPG	Photoplethysmography				
NATT	No antithrombotic therapy	PSG	Polysomnogram or polysomnography (sleep apnea test)				
NCDR	National Cardiovascular Data Registry (ACC)	PUFA	Polyunsaturated fatty acids (Omega-3s)				



ACRONYM LIST (cont'd)

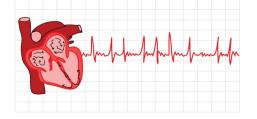
Acronym	Definition	Acronym	Definition			
PV	Pulmonary vein(s)	SDB	Sleep-disordered breathing			
PVAI	Pulmonary vein antrum/antral isolation	SDH	Subdural hemorrhage			
PVC	Premature ventricular contractions	SDOH	Social determinants of health			
PVI	Pulmonary vein isolation (catheter ablation)	SE	Systemic embolism (clot)			
PW	Posterior wall	SGLT2	Sodium-glucose cotransporter 2			
QALY	Quality-adjusted life year (economic measure of an intervention)	S-LAAO SOB	Surgical left atrial appendage occlusion Short of breath			
QOL	Quality of life	SR	Sinus rhythm			
QRS	QRS is a heartbeat segment on the ECG	SSE	Stroke or systemic embolism			
QT	QT interval is a heartbeat segment on the ECG	STS	Society for Thoracic Surgery			
R01	Health-related research grant from the NIH	SVC	Superior vena cava			
RA	Right atrium	TCM	Traditional Chinese medicine			
RAA	Right atrial appendage	TE	Thromboembolic			
RCT	Randomized controlled trials	TEE	Transesophageal echocardiography			
RDI	Respiratory disturbance index	TIA	Transient ischemic attack (mini-stroke)			
REM	Rapid eye movement	TSH	Thyroid stimulating hormone			
RF	Radiofrequency	TTE	Trans-thoracic echocardiogram			
RF	Risk factors	TTM	Transtelephonic monitor			
RFM	Risk factor management	TTR	Time in therapeutic range			
RR	Risk reduction	VATS	Video-assisted thoracic surgery			
RR	Relative risk	VGLB	Visually-guided laser balloon			
RSPV	Right superior pulmonary vein	WACA	Wide area circumferential ablation			
RUPV	Right upper pulmonary vein	WL	Weight loss			
RV	Right ventricular		3			
RVH	Right ventricular hypertrophy	Glossarv: htt	tps://www.stopafib.org/downloads/glossary.cfm			
RVR	Rapid ventricular response	,	,			
SBP	Systolic blood pressure					
SCAF	Subclinical atrial fibrillation					



SCD



Sudden cardiac death



Atrial Fibrillation Support Forum



The largest AFib/AFlutter member support on Facebook with over 32,000 global members

As featured in:

The AFib Cure and the European Heart Rhythm Association Consensus Document (in EP Europace)









































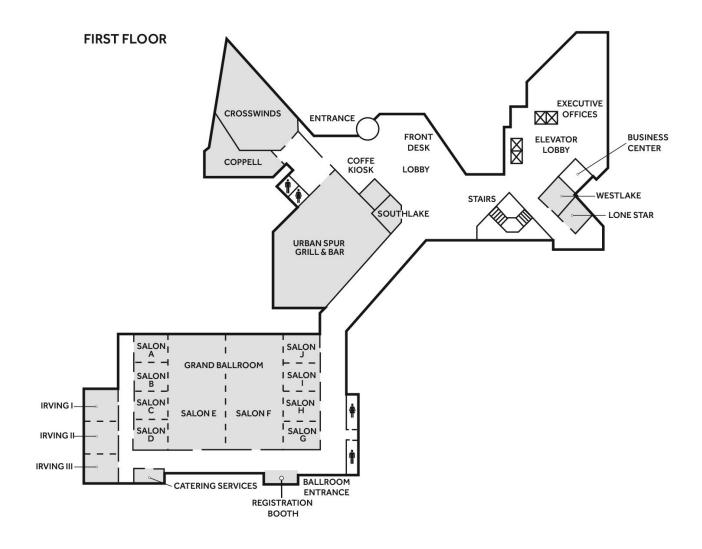








HOTEL FLOORPLAN



CONFERENCE EVALUATION AND FEEDBACK



August 9-11, 2024

You can fill out ev	aluations online	at the links	below.

In-per	son attendees: https://v	vww	surv	eymo	onkey	,.com	/r/G	IRSIF	202	4in-p	erson
Livestream attendees: https://www.surveymonkey.com/r/GIRSIR2024livestream											
l am a: ☐ Patient ☐ Family member ☐ Other:											
If a patient, how long have you had afib?											
Type of afib: 📮	Paroxysmal (Intermittent)		Persis	stent/	/Long	stand	ding	Persis	stent	(Con	tinuous)
Before this conference, what was your level of knowledge or understanding about the following afib-related areas? (1 = none, 10 = thorough)											
	Causes & risk factors	1	2	3	4	5	6	7	8	9	10
	Medications	1	2	3	4	5	6	7	8	9	10
	Stroke risk	1	2	3	4	5	6	7	8	9	10
	Stroke prevention	1	2	3	4	5	6	7	8	9	10
	Procedures	1	2	3	4	5	6	7	8	9	10
	Afib overall	1	2	3	4	5	6	7	8	9	10
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	Medications	1	2	3	4	5	6	7	8	9	10
	Stroke risk	1	2	3	4	5	6	7	8	9	10
	Stroke prevention	1	2	3	4	5	6	7	8	9	10
	Procedures	1	2	3	4	5	6	7	8	9	10
	Afib overall	1	2	3	4	5	6	7	8	9	10
What were the r	nost valuable things you l	earne	ed at	the c	onfer	ence	?				





CONFERENCE EVALUATION AND FEEDBACK



August 9-11, 2024

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 at the conference, and your results? Please provide your contact information: Name:
E-mail address (please print):
Phone number (as backup option):
How did you travel to the Get in Rhythm. Stay in Rhythm.® Atrial Fibrillation Patient Conference? □ By Airplane □ By Car (stayed at the hotel)
By Car or Mass Transit (commuted daily, staying somewhere other than the host hotel) Other (please specify):
Please share your comments about the conference, including program, speakers, venue, food, etc
What should be added, or covered in more detail, at our next conference? Do you have any other suggestions for our next conference?
☐ Please subscribe me to the StopAfib.org email newsletter at this email address (please print):

Thank you for attending 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 live event again next year.

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









Get in Rhythm. Stay in Rhythm. ®

Atrial Fibrillation Patient Conference

AGENDA

All times are Central Daylight Time (CDT)

Friday, August 9, 2024

Opening and Managing Afib 8:30 AM-10:00 AM Break and Visit Sponsors 10:00 AM-10:30 AM 10:30 AM-12:00 PM Managing Afib Along with Other Issues 12:00 PM-1:30 PM Lunch (provided) and Visit Sponsors 1:30 PM-3:00 PM Preventing Afib Strokes 3:00 PM-3:30 PM Break and Visit Sponsors 3:30 PM-4:30 PM The Evolution of Afib Surgery 4:30 PM-5:00 PM Resources and Closing 5:00 PM-6:30 PM **VIP** Reception

Saturday, August 10, 2024

8:30 AM-10:00 AM Afib Surgery Updates 10:00 AM-10:30 AM Break and Visit Sponsors 10:30 AM-12:00 PM Catheter Ablation Updates Lunch (provided) and Visit Sponsors 12:00 PM-1:30 PM 1:30 PM-3:00 PM Looking Toward the Future 3:00 PM-3:30 PM Break and Visit Sponsors New Afib Guidelines 3:30 PM-4:20 PM 4:20 PM-5:00 PM Research and Closing

Sunday, August 11, 2024

8:30 AM-10:00 AM
 10:00 AM-10:30 AM
 10:30 AM-12:00 PM
 Patient-Focused Afib Research
 Break and Visit Sponsors
 Living with Afib, Takeaways, and Closing