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## Minneapolis Heart Institute Foundation® Cardiovascular Grand Rounds

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**Title:** Case Carousel

**Speaker:** Robert Fraser, MD, Cardiovascular Disease Fellow  
Minneapolis Heart Institute® at Abbott Northwestern Hospital &  
Hennepin County Medical Center

**Date:** April 29, 2019

**Time:** 7:00 - 8:00 AM

**Location:** ANW Education Building, Watson Room

### OBJECTIVES

At the completion of this activity, the participants should be able to:

1. Summarize the 2018 4th universal definition of myocardial infarction.
2. Summarize the WHO ICD-10 codes for elevated troponin.
3. Apply the 4th universal definition of MI and troponin-related ICD-10 codes to clinical practice.

### ACCREDITATION

**Physician** - Allina Health is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. Allina Health designates this live activity for a maximum of 1.0 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should only claim credit commensurate with the extent of their participation in the activity.

**Nurse** - This activity has been designed to meet the Minnesota Board of Nursing continuing education requirements for 1.0 hours of credit. However, the nurse is responsible for determining whether this activity meets the requirements for acceptable continuing education.

### DISCLOSURE POLICY & STATEMENTS

Allina Health, Learning & Development intends to provide balance, independence, objectivity and scientific rigor in all of its sponsored educational activities. All speakers and planning committee members participating in sponsored activities and their spouse/partner are required to disclose to the activity audience any real or apparent conflict(s) of interest related to the content of this conference.

The **ACCME defines a commercial interest** as “any entity” producing, marketing, re-selling, or distributing health care goods or services consumed by, or used on, patients. The ACCME does not consider providers of clinical service directly to patients to be commercial interests - unless the provider of clinical service is owned, or controlled by, an ACCME-defined commercial interest.

### Moderator(s)/Speaker(s)

Dr. Robert Fraser has disclosed that he DOES NOT have any real or apparent conflicts with any commercial interest as it relates to presenting the content in this activity/course.

## Planning Committee

Dr. Alex Campbell, Jake Cohen, Jane Fox, Dr. Mario Gössl, Dr. Kevin Harris, Dr. Kasia Hryniewicz, Rebecca Lindberg, Amy McMeans, Dr. Michael Miedema, Dr. JoEllyn Moore, Pamela Morley, Dr. Scott Sharkey, and Jolene Bell Makowsky have disclosed that they DO NOT have any real or apparent conflicts with any commercial interest as it relates to the planning of this activity/course. Dr. David Hurrell has disclosed the following relationship -Boston Scientific: Chair, Clinical Events Committee.

## NON-ENDORSEMENT OF COMMERCIAL PRODUCTS AND/OR SERVICES

We would like to thank the following company for exhibiting at our activity.

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A reminder for Allina employees and staff, the Allina Policy on Ethical Relationship with Industry prohibits taking back to your place of work, any items received at this activity with branded and or product information from our exhibitors.

## PLEASE SAVE YOUR SERIES FLIER

When you request a transcript this serves as your personal tracking of activities attended. Most professional healthcare licensing/certification boards **will not accept** a Learning Management System (LMS) transcript as proof of credit; there are too many LMS's across the country and their validity/reliability are always in question.

If audited by a licensing board or submitting for license renewal or certification renewal, boards will ask you not the entity providing the education for specific information on each activity you are using for credit. You will need to demonstrate that you attended the activity with a copy of **your certificate/evidence of attendance, a brochure/flier and/or the conference handout.**

Each attendee at an activity is responsible for determining whether an activity meets their requirements for acceptable continuing education and should only claim those credits that he/she actually spent in the activity.

**Maintaining these details are the responsibility of the individual.**

## PLEASE SAVE A COPY OF THIS FLIER AS YOUR CERTIFICATE OF ATTENDANCE.

Signature: \_\_\_\_\_

*My signature verifies that I have attended the above stated number of hours of the CME activity.*

*Allina Health - Learning & Development - 2925 Chicago Ave - MR 10701 - Minneapolis MN 55407*