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NEW TREATMENT FOR NON-VALVULAR ATRIAL FIBRILLATION (Fib)

Atrial Fibrillation (AFib) is a common kind of irregular heartbeat. According to the American Heart Association, more that 2.7 million people in the US are known to have AFib. Because people can have AFib without symptoms, . the condition can go undiagnosed. The actual number of Americans with AFib could be as high as 6.1 million. That number is expected to double by 2050. The is because the risk of AFib increases with age, along with other health conditions that are risk factors for AFib, like high blood pressure and heart disease since the population is getting bigger and people are living longer.

The heart is divided into four chambers – two upper chambers called the right and left atria and two lower chambers called the right and left ventricles. With each heart beat blood is pumped to and from the heart and throughout the rest of the body. The heart's electrical conduction system controls the pumping. During a normal heart cycle, one signal starts the process and keeps the heart beating in a regular rhythm and at a rate of 60 to 100 beats per minute. During AFib the electrical signals come from multiple areas in the atria. These disorganized signals cause the atria to quiver rapidly and irregularly which can result in the ventricles not pumping the blood out to the rest of the body as it should.

There are two main types of AFib: valvular and non-valvular. Valvular AFib refers to AFib that is caused by a heart valve problem. Examples include a narrow or leaking valve or a valve repair or replacement. Non-valvular Afib (NVAF) refers to AFib that is not caused by a heart valve problem. NVAF is the most common type of AFib.

People with AFib have a five times greater risk of stroke. AFib can cause blood to pool and form clots in the left atrial appendage (LAA) of the heart. The LAA is a small, ear- shaped sac in the muscle wall of the top left chamber of the heart. If a blood clot escapes from the heart, it can travel through the blood stream to the brain and cause a stroke.

Symptoms of AFib include: heart palpitations, lack of energy, feeling tired, dizziness or a feeling of faintness or light-headedness, chest discomfort (pain, pressure or tightness) and/or shortness of breath.

The treatment options are different for valvular and NVAF. The goals of treatment may include restoring a normal heart rhythm, controlling your heart rate, and/or reducing your stroke risk. Blood thinning medications (usually warfarin) can reduce the formation of blood clots and therefore reduce your risk of stroke. For certain reasons, some people do not or cannot take blood thinners for long term.

Patients with NVAF now have an alternative to blood thinning medications. The **Watchman Left Atrial Appendage Closure (LAAC)** implant may reduce the risk of AF related stroke for patients considered suitable for warfarin but who have reason to see a non-drug alternative. The Watchman implant closes off the left atrial appendage (LAA) to keep blood clots from the LAA from entering the bloodstream and potentially causing a stroke. Over time patients may be able to stop taking warfarin. For patients with non-valvular AF, the LAA is believed to be the source of the majority of stroke causing blood clots. The Watchman device also reduces the non-procedure related major bleeding. It does not require open heart surgery and is a one-time implant that does not need to be replaced.

For information on the Watchman implant and to see a video go to: www.TheWatchman.com.



Special Points of Interest:

""People with AFib have a five times greater risk of stroke."

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SMART WATCHES & HEALTH

APPLE WATCH—SERIES 4

"The new watch has features that detect falls and heart problems" This new Apple watch (starts at \$399) focuses on preventive health and expanding its target audience. The watch has new features that detect falls and heart problems. The fall monitoring app uses sensors in the watchband, which are automatically enabled for people 65 and older after they put in their age. The sensors track and record the user's movements and note if the wearer's gait becomes unsteady. The wearer is notified if a fall is detected and has one minute to respond. If there is no response, emergency services is notified. The one minute also gives the wearer to prevent a false alarm like a dropped watch. Fall deaths in the US increased 30% in the past decade and 3 million older people go to the emergency room for fall injuries each year.

The ECG monitoring app also uses sensors in the wristband to monitor a patient's heartbeat and send alerts if it gets too fast or too slow. The app is specifically meant to detect atrial fibrillation. The watch's sensors can detect a heart rhythm in 30 seconds, creating a "waveform" readout. It also allows the user to note how they are feeling so they can communicate that information to their doctor.

Consumers can expect to see more ways to track vital signs, like blood sugar.

ALTERNATIVE SMARTWATCHES

Nurture Watch (\$155 prepaid or \$23 per month plus \$70 for the watch)

This watch lets a caregiver track a loved one's whereabouts through GPS, but it can make two-way calls, monitor heart rate and detect falls. The watch also has a red SOS distress button in the event of an emergency. Unlike the Apple watch, it works with both the iPhone and Android smart phones.

Locate Watch (\$16 per month for a minimum of 12 months)

This watch uses GPS to track loved ones, along with integrated cellular for making calls and built-in Wi-Fi to access the internet when in a wireless network. It also includes an SOS button to call a caregiver or family member in the event of trouble or if the watch wearer leaves a specified area. If users pay an extra \$10 per month, the SOS button can also call a 24/7 emergency monitoring center.

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4 WAYS TO BOOST YOUR IMMUNITY

DRINK UP

Stay hydrated to keep your immune system in top germ-slaying shape. That is even more important when your body loses water through a sweaty fever, a runny nose, and teary eyes. Carry a water bottle and sip often.

GET MOVING

Exercise also keeps your immunity up. In one study, people who worked out at moderate intensity called in sick half as often as those who did not exercise.

GO TO BED EARLIER

Skimping on sleep lowers resistance. Adults who slept 6 hours or less per night were four times as likely to catch a cold. Prioritize sleep, and don't push yourself if you feel sick- listen to your body's call for rest.

TAKE PRIORITIES

Good bacteria help produce protective immune cells. Try unsweetened yogurt or a supplement.

"Skimping on sleep lowers resistance. Adults who slept 6 hours or less per night were four times as likely to catch a cold"

ACA RECERTIFICATION PACKETS

If your ACA certification expires on June 30, 2019, your will receive a packet of information on how to recertify by early May. If you do not receive your packet, please contact the ACA office by phone or email. If you have moved since becoming certified, you must notify ACA of your new address or you may not receive your packet.

NOTE: You will not receive a recertification packet if your certification does not expire until June 30, 2020.

What to submit to ACA as proof of continuing education:

- · certificates of attendance
- copies of transcripts that document class completion (multiply each qtr. credit x 10 and each semester credit x 15 to get CE credits)
- CE printouts from employer
- Lists of CE activities verified by manager signature

The documentation must include the following:

- date(s) of attendance
- · title of activity
- number of CE credit assigned or amount of time spent (1hour of time equals 1 CE credit)
- signature of person issuing or verifying the activity

NOTE: Any recertification postmarked between June 30, 2019 and August 31, 2019 must include a \$ 40.00 late fee.

After September 1, 2019, recertification is by re-examination.



ACAreer is published by the American Certification Agency for Healthcare Professionals and is free to all of the certificants. If you have any questions, comments, or topics you would like to see covered in our newsletter, please fax them to (574)277-4624, phone to (574)277-4538, e-mail to Info@acacert.com or mail to ACA, PO Box 58, Osceola, IN 46561.

BASIC VENIPUNCTURE, 3RD EDITION DVD

The Center for Phlebotomy Education has released the latest version of the CLSI venipuncture standard. Features of the 3rd edition include:

- Updated to reflect the newly revised CLSI venipuncture standard
- Completely new script, narrator, and organization of the material
- Filmed in high definition
- 12 minutes longer than the 2nd edition
- Closed captioned by the National Captioning Institute

For more information and to see a preview clip: www.phlebotomy.com

22 Months of In-house CEs

The Center for Phlebotomy Education has just packaged 22 months of their "Abbreviated Teaching Modules (ATMs)" in one download and priced it at a reduced cost. The ATMs are short 1-2 page articles on a wide variety of phlebotomy topics. You can distribute monthly to staff and then grade and file it.

The 22 module set is downloaded immediately after your online purchase as zipped PDFs with answer keys for each exercise.

Topics include: The Order of Draw, Hematoma Prevention, Hemolysis, Blood Cultures Done Right, Infants and Toddlers in the Healthcare Environment, Communicating with Elderly Patients, and Drawing From Young Children.

Visit <u>www.phlebotomy.com</u> to get more information and/or to purchase.