## **Atrial Fibrillation Controversies Presentation**

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## **CME Questions**

- 1. A patient presents after an episode of sudden syncope. There were no symptoms prior to the episode. The patient has stable coronary disease and a DDD pacemaker for sick sinus syndrome. The pacer interrogation demonstrated two episodes of atrial fibrillation lasting 3 seconds each in the past four months. The guideline recommended therapy for this patient is:
  - a. Full dose anticoagulation with warfarin
  - b. Begin sotolol orally
  - c. Treat the underlying disease process \*\*\*
  - d. Consider ablation therapy
  - e. Evaluate for atrial appendage occlusion device
- 2. Which of the following patients meets guideline qualifications to be considered for ablation of atrial fibrillation?
  - a. Asymptomatic paroxysmal atrial fibrillation with episodes lasting several hours
  - b. A patient who finds it difficult to manage warfarin and cannot afford a newer anticoagulant
  - c. An asymptomatic patient with permanent atrial fibrillation
  - d. A patient with CHF who presents with recurrent atrial fibrillation on antiarrhythmic\*\*\*
  - e. A patient with symptomatic atrial fibrillation who has failed three prior ablations
- 3. A rate control strategy is appropriate for which of the following patients?
  - a. A 70 year old patient with asymptomatic persistent atrial fibrillation\*\*\*
  - b. A 50 year old male who notes decreased exercise tolerance with palpitations
  - c. A patient who with use of beta blocker or calcium channel blocker for hypertension develops profound bradycardia
  - d. A 75 year old patient with end stage oxygen dependent COPD and paroxysmal atrial fibrillation