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SUPPORTING PHYSICIANS, TRAINEES, AND CARDIOVASCULAR TEAM MEMBERS WITH EDUCATION, ADVOCACY, & NETWORKING OPPORTUNITIES

Empowering Hearts, Igniting Minds, and Shaping Futures - Nebraska ACC takes the lead in promoting Education, Networking and Advocacy!

I am pleased to provide you with an exciting update on the recent developments within our NE ACC chapter. As we gear up for our upcoming Annual Chapter meeting, there are several important updates to share. Here are the key highlights:

Nebraska ACC's 6th Annual Chapter Meeting: October 11, 2023, Save the Date! Our highly anticipated annual chapter meeting is scheduled to take place on October 11th at Happy Hollow club, Omaha from 5:00 PM to 8:30 PM. This event serves as an excellent opportunity for members to come together, network, and share valuable insights on the latest advancements in cardiovascular care.

FIT Abstract Competition:

Calling all Fellows! This is your chance to present your research and clinical case studies to a diverse audience of cardiovascular professionals. We encourage all members to participate actively and contribute to the scientific discussions. Governor, Nebraska ACC

MD, FACC, FSCAI

Anuradha Tunuguntla

Keynote Speaker: Cathie Biga, MSN, RN, ACC Vice President in 2023-2024
We are thrilled to welcome Cathie Biga as our distinguished guest speaker for the annual chapter meeting. Cathie is a renowned expert in the field of cardiovascular care, and her insights will provide valuable perspectives on the latest trends, challenges, and opportunities in the field of Cardiovascular Medicine.

Make sure to mark your calendars and join us to hear from Cathie as she shares her expertise and engages in a thoughtprovoking discussion.

Attend the ACC's Legislative Conference 2023, taking place from Oct. 15 - 17 in Washington, DC. The three-day meeting offers cardiovascular clinicians spanning the entire care team a chance to hear from ACC leaders, staff and other experts on health policy issues affecting patients and the profession, while also providing an important opportunity to speak directly with members of Congress and their staff.

2023 Cardiovascular Team Member Spring Meeting

I would like to extend my heartfelt appreciation to Jessica Livingston for her exceptional efforts in organizing the spring meeting for CVT members. The spring meeting was a resounding success, bringing together our CVT community and facilitating valuable discussions and knowledge-sharing. Jessica's dedication and hard work were instrumental in making the event a memorable and rewarding experience for all participants.

Newsletter Contribution:

We want to hear from YOU! Contact <u>Dr. Arun Kanmanthareddy</u> if you would like to write for the NE ACC Newsletter. The Newsletter features four brief articles quarterly: Chapter News, Cardiology Update (by a cardiologist), FIT Corner (by a fellow in training), and CVT Corner (by a CV team member).



CHAPTER NEWS CONTINUED

Let us collaborate and create a vibrant and informative newsletter that showcases the expertise and achievements of our members.

As we continue to grow and thrive as a chapter, I want to express my gratitude for your ongoing support and engagement. Let's make the annual chapter meeting a tremendous success and further strengthen the bonds within our Nebraska ACC Community.

Please follow us on Twitter and Facebook!



Ann Narmi, MD Interventional Cardiologist CHI Health

CARDIOLOGY UPDATE

MYOCARDIAL INFARCTION WITH NON-OBSTRUCTIVE CORONARY ARTERIES (MINOCA):WHAT IS IT AND WHERE ARE WE NOW?

MINOCA is a group of patients that fulfill the universal definition for MI yet have coronary stenosis less than 50% and have no clinically overt specific cause for the acute event. The prevalence of MINOCA is 5-10% of all MIs and its 1-year all-cause mortality is 4.7%. MINOCA patients are more likely to be female and more are likely to be Black or Hispanic/Latino. Interestingly, the prevalence of traditional risk factors in MINOCA is less than expected.

In the past, clinicians often relied on invasive coronary angiography to tell us if there was obstructive coronary artery disease to be causing inadequate blood flow to the heart, causing the MI. Yet now, we see not uncommonly, MIs with no significant blockage on coronary angiogram. Leaving clinicians and patients puzzled, it has come to be that MINOCA is a working diagnosis that necessitates further identification of an underlying cause.

What is the cause of MINOCA: The underlying cause of MINOCA can be threefold:

coronary causes, cardiac causes, and noncardiac causes. Examples of coronary causes are occult plaque rupture or erosion, SCAD, coronary spasm, embolism, and microvascular dysfunction. Cardiac causes include Takotsubo cardiomyopathy, myocarditis, cardiac trauma, and tachyarrhythmias. Noncardiac causes include CVA, pulmonary embolism, sepsis, renal failure, hypotension, and hypoxia, to name a few.

How do we diagnose MINOCA? In addition to coronary angiography, tools such as OCT and IVUS can help determine plaque rupture, dissection, and hematoma, for example. In the cath lab, procedures that help determine if the patient has coronary vasospasm or endothelial dysfunction (previously Cardiac X syndrome) should be considered. MRI, done within 2 weeks of presentation, is an important diagnostic tool as it can distinguish normal myocardial tissue from tissue that is scarred or inflamed. These studies along with echocardiography, high sensitivity troponin, d-dimer, pro-BNP, coagulation studies, and oxygen levels are also recommended if clinically appropriate.

How do we treat MINOCA? The treatment depends on the MINOCA etiology. Thus far, there have been no randomized control trials addressing recommended therapies. Treatment is similar to MIs due to obstructive CAD such as antiplatelet therapy, statins, ACE-inhibitors/angiotensin receptor blockers, and beta-blockers, but randomized control trials are needed to further evaluate the therapeutic approach in this population.

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Mansi Oberoi, MD Cardiology Fellow University of Nebraska **Medical Center**

FIT CORNER

BUILDING RESILIENCE DURING FELLOWSHIP: NAVIGATING CHALLENGES WITH PERSONAL GROWTH

Cardiology fellowship is a challenging phase of our training, demanding unwavering dedication, and resilience – the ability to adapt, recover, and **thrive** amidst adversity. As a fellow myself, I understand the trials and tribulations that come with this intense training and have provided insights with practical strategies for building resilience.

Embrace Adversity as Growth: Throughout fellowship, we encounter numerous challenging cases, high-stress situations, setbacks, and criticism. Balancing patient care, academics, research, and personal life becomes overwhelming. We routinely experience imposter phenomenon which describes as feeling like a fraud and doubting the validity of one's own achievements. We may also face cognitive distortions and develop negative feelings including personalization/blame, overgeneralization, catastrophizing and mind reading. These feelings distort self-confidence and competence, impacting learning. This can be overcome by cultivating a growth mindset, as proposed by psychologist Carol Dweck.2 A growth mindset involves recognizing that abilities can be developed through persistence, dedication and assimilating feedback leading to success.2,3 Failure or setback should be viewed as valuable feedback for developing skillset rather than as a

reflection of incompetence. We must prioritize tasks, utilize effective time management techniques, learn to delegate when appropriate, and be optimistic.

Self-Awareness and Reflection: Developing **metacognition**- ability to think about and reflect upon one's own thinking processes, is vital for resilience building. This enhances self-awareness by recognizing strengths, weaknesses, emotional responses, cognitive biases, and thought patterns, enabling to identify areas for improvement and developing strategies for managing challenges efficiently. Metacognitive skills also help in learning and problem solving by assessing situations, evaluating potential strategies, and adapting approach based on the context.4 By recognizing and understanding emotional reactions, we can regulate stress and anxiety and maintain a balanced perspective even in high-pressure situations we face during fellowship.

Mindfulness and Self Care: Mindfulness involves cultivating non-judgmental awareness of the present moment, which can enhance emotional regulation, reduce stress, and foster adaptability. We should incorporate mindfulness practices, such as meditation, yoga, deep breathing exercises with sensory awareness, and writing down our thoughts in our routine. Ensuring sufficient sleep can be challenging, especially with shift work, but is imperative and has shown to significantly enhance cognitive ability, precise decision making, memory consolidation while reducing stress and fatigue. 5 Coupled with self-care activities, such as maintaining healthy lifestyle with nutrition and regular exercise and spending time with loved ones, helps to recharge and prevent burnout.

Mentorship, Support and Networking: Mentorship fosters personal growth and resilience. 6 It is crucial to identify mentors early during fellowship who can provide valuable guidance, constructive feedback, perspective, encouragement, and networking that aid in navigating this demanding journey. Sharing experiences, discussing challenges, and learning from peers going through similar situations creates a sense of community and mutual understanding, and is incredibly comforting and validating. Networking through conferences, symposiums, sponsored education programs and social platforms, facilitate connecting with experienced cardiologists, collaborate research and learning, and opens doors to new horizons.

Participate in Resilience Training Programs: The Accreditation Council for Graduate Medical Education's Clinical Learning Environment Review Program has tasked fellowship programs with educating trainees regarding wellness and resilience training. These programs are based on skill building exercises that help to set realistic goals and expectations, manage stressful clinical events and gain gratitude. Furthermore, each skill-building exercise is designed to promote specific character strengths specifically persistence and zest, social intelligence, forgiveness, hope, and gratitude. They also provide a safe space for sharing experiences, discuss challenges, and foster mutual learning.7

Conclusion: Building resilience during cardiology fellowship transforms us to thrive amidst challenges, professional and personal growth. By adopting a growth mindset, learning from failures and feedback, managing work-life balance, coping with high-stress situations, seeking mentorship and support, and engaging in resilience-building training, we establish a resilient foundation for a fulfilling and impactful career in cardiology.

Other helpful resources

1. ACGME AWARE app https://apps.apple.com/tt/app/acgme-aware/id1458893753, https://play.google.com/store/apps/details?id=org.acgme.aware&hl=en&gl=US

2. ACGME Well-being resources https://dl.acgme.org/pages/well-being-tools-resources

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FIT CORNER CONTINUED

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CVT CORNER

ELECTIONS FOR THE NEBRASKA CV TEAM CHAPTER REPRESENTATIVE TO THE ACC

Attention all CV Team members: Watch your emails for an election link sent from the national ACC offices. There are two candidates who have submitted applications for the position. Below you can find more information about our candidates. On behalf of the Nebraska ACC, I also wanted to thank Jessica Livingston for her dedication to this role these past four years. Under her watch, the Nebraska ACC was able to grow its CV Team participation, host annual meetings, and provide valuable education for CV Team members. **THANK YOU, JESSICA LIVINGSTON!**

CANDIDATES

1. Nicole López-Schaecher, APRN-NP About Nicole:

Nikki Lopez-Schaecher is currently a Cardiology Nurse Practitioner specializing in Structural Heart Disease at Nebraska Medicine. She has been practicing in the field of cardiology as health educator, nurse, and nurse practitioner for over 25 years, in the areas of community health/outreach, advocacy, hospital administration and direct patient care. She has been a member of the ACC Interventional and CV Team for three years and earned her MSN-NP Acute Care from UNMC College of Nursing in 2018. Her background in health education, program development, legislation/advocacy, and nursing knowledge to create a compassionate environment that respects their dignity while providing appropriate resources and collaborating with the health care team to achieve quality outcomes. This continually challenges her clinical expertise with evidenc-based practice while integrating patient and family-centered goals in plan development with Structural Heart Disease.

Position Statement

I would be honored to serve as the CV Team Chapter Representative for the Nebraska Chapter of the ACC. healthcare is dynamic and ever-changing. A multidisciplinary approach to caring for cardiology patients is essential to care delivery. The diverse professional members of the CV team are vital in ever changing healthcare delivery and providing comprehensive care. ACC serves as a national organization to guide and care for CV patients. I would be honored to represent the CV team members of Nebraska at the national level while working locally with many of you as we improve cardiovascular health of Nebraskans and increase membership.

2. Kristin Miles, DNP, APRN, MS, FNP-BC, AGACN-BC About Kristin:

Kristin has been a nurse practitioner for more than 20 years, most of which has been in Cardiology and transplant medicine. She currently also is the market director in the Midwest Division for Common Spirit Health of a metro area Cardiology and Cardiothoracic and Vascular surgical practice. She serves as the provider site lead for this practice with greater than 50 providers. Kristin is a nurse practitioner in general cardiology and remains active clinically. She received her BSN from the University of Iowa, and then her Master's degree as a family nurse practitioner at Creighton University. After about a 15 year break in graduate school, Kristin returned to Creighton University for a post masters certificate as an adult-gerontology-acute care nurse practitioner and ultimately her Doctorate of Nursing Practice. She is currently enrolled in the Executive Healthcare MBA program in health care leadership also through Creighton University, with anticipated completion in April 2024. Throughout her career she has held multiple advanced practice leadership positions and now serves as the provider site leader for an expanding group of Advanced Practice Providers (APP's). Kristin's areas of interest in leadership are in clinical operations and standardization. She has done extensive work in template management and standardization and team based care implementation working to advocate for top of licensure work for APP's. She serves on local and national advance practice leadership councils for Common Spirit Health.

Position Statement

I would be honored to represent the Nebraska CV Team Chapter Representative of the ACC. I am passionate about developing ways to make excellent

CVT CORNER CONTINUED

cardiology care accessible to all and cultivating a team of providers who share this vision. In my work with advanced practice providers and physicians in the Cardiovascular Service Line, I have worked to standardize care delivery models, improve access to care, and develop a team based care model to improve efficiency in care delivery while maintaining excellence in the quality of the care being delivered. I have worked to adopt this team based care model in our practice, acknowledging how important it is to support the professional needs of the entire cardiovascular team to achieve the best possible patient outcomes. I would work hard to encourage engagement of the cardiovascular care team and continue to advocate for a team based approach to care, as I believe we deliver better care within a team of individuals committed to each other and sharing in a vision for the best possible patient experience and outcomes. I would advocate for ongoing career and professional development, raise awareness of ways to improve performance and strive to become the effective team members. I commit to continue to foster relations with other team organizations and all care providers. I appreciate the opportunity to represent Nebraska and look forward to advocate for the CV team!

ACC CV TEAM NEWSLETTER

Did you know? The ACC has a monthly newsletter for CV Team Members. Click on the link below to learn more about what is happening on the national stage!

Read the ACC CV Team Newsletter here!

JOIN US! NEBRASKA ACC'S 2023 ANNUAL MEETING



CALL FOR ABSTRACTS!

Nebraska medical students, residents, fellows-in-training, cardiovascular physicians, advance practice providers and cardiovascular team members are requested to submit research abstracts for the Nebraska ACC 2023 Annual Meeting. Abstracts may cover any cardiovascular topic. Abstracts from projects previously presented at national meetings are eligible for the Nebraska ACC. Excellent case reports and case series that include 5 or fewer patients will also be considered. Abstracts accepted by the Nebraska ACC are still eligible for subsequent submission to the national ACC Scientific Sessions. Accepted abstracts will be presented as moderated PowerPoint posters at the Nebraska ACC 2023 Annual Meeting on Wednesday, October 11, 2023. In addition, accepted abstracts will be published on the Nebraska ACC website. If you are interested in submitting an abstract, please visit our event website here! You'll find additional guidelines and information.



ACC 2023 LEGISLATIVE CONFERENCE



Don't miss your chance to join the Nebraska ACC's delegation on their visit to Washington DC!

For more information, or to register, please visit the ACC's website here!

ACC's Legislative Conference 2023 / Oct. 15 - 17, 2023

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