

Assessment of Provider Knowledge and Therapeutic Approaches for Reducing Stroke Risk in Patients with Nonvalvular Atrial Fibrillation.



Any responses provided will be kept CONFIDENTIAL. Your participation is voluntary. All responses will be combined, and the information you provide will remain ANONYMOUS. Our facility may use a 3rd party to collate and report data from your responses. Completion of this form provides permission to do this. Please completely shade in each response oval that you select. Shade ovals like this . In the boxes, print neatly and write only 1 digit per box, for example: 23 . Thank you for your participation!

Healthcare Professional Type	O Physician	O PA O NP		·	Nurse	O Phar	O Pharmacist				
Trolessional Type	Other-Describe										
Practice Area: (Cardiology Hemato	ology	amily Med		O Neuro	logy O Inte	ernal Medicine Cardiology	◯ Geri	atrics		
Practice Setting: (Check all that apply)											
Group Practice Hospital/IDS Outpatient Clinic Inpatient Clinic Long-Term Care Anticoagulation Clinic Medical School Other:									linic		
How long have you been in practice (in years):											
Approximately what percentage of your adult patients has a diagnosis of NVAF? (Mark one only):											
○ None ○ 1-10 ○ 11-25 ○ 26-50 ○ 51+ ○ Don't know											
Confidence in Ma	naging Patients with NV	<u>AF</u>					1				
In managing pati	ents with NVAF:				Not confident	Somewhat confident	Moderately confident	Very confiden	t		
How confident are you in using information about stroke risk and bleeding risk assessment to determine appropriate antithrombotic therapy?					0	0		0			
How confident are you in selecting appropriate anticoagulant therapy?					0	0	0	0			
How confident are you in using oral anticoagulant therapies for reducing the risk of stroke?					0	0	0	0			
4. How confident or familiar are you in using CHA ₂ DS ₂ -VASc scores to access stroke risk?					0	0	0	0			
How confident are you in applying ACC/AHA/HRS guidelines to the management of NVAF?						0	0	0			
6.How confident or familiar are you in using HAS-BLED score to assess bleeding risk?					0	0	0	0			
					1			1			



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Knowledge of NVAF Management

7a.	What CHA ₂ DS ₂								
	JD is a 73yo male with HTN and CHF. His BP is 165/90. He has no history of a stroke or thromboembolic event.								
	○ CHA₂ DS₂VASc=1 ○ CHA₂ DS₂VASc=2		c=2	CHA ₂ DS ₂ VASc=3					
	O CHA ₂ DS ₂ VA	$ASc=4$ \bigcirc CHA $_2$ DS $_2$ VAS	c=5	_					
7b.	Which antithrombo	otic would you choose for this	patient	t (choose al	I that apply)?				
	O No therapy	○ Aspirin 81mg ○ Vita	min K	Antagonist ((VKA)	Direct Or	ral Anticoagulant (DOAC)		
		rent ACC/AHA/HRS guideline eptable option for anticoagula				AF patients	s over 65 years of age is		
	O Individuals with	n diabetes	nder	O Indiv	viduals with p	revious st	roke or TIA		
	O Individuals with	h heart failure O None of th	e abov	re OUns	ure				
	lease rate your kno VAF patients at risl	owledge with the following anti- k for stroke:	coagula	ant therape	utic classes i	n terms of	their potential use in		
	_			Not at all Familiar	Somewhat Familiar	Very Familiar			
		1. Vitamin K Antagonists (VK	A)?	0	0	0			
		2. Direct Oral Anticoagulant		0	0				