



Welcome to the **Northwest Heart Failure Collaborative (NWHFC) Project ECHO**. Enclosed in this reference guide you'll find everything you'll need for successful participation in our web-based conferences.

1. NWHFC team and contact information
2. NWHFC: Project ECHO Web Conference Diagram
3. Conference connection instructions (for browsers, IPs, and mobile devices)
4. Submitting patient case questions
5. Patient Case Questions: Presentation Tips
6. Earning Continuing Medical Education (CME) Credit



## 1. NWHFC Team & Contact Information

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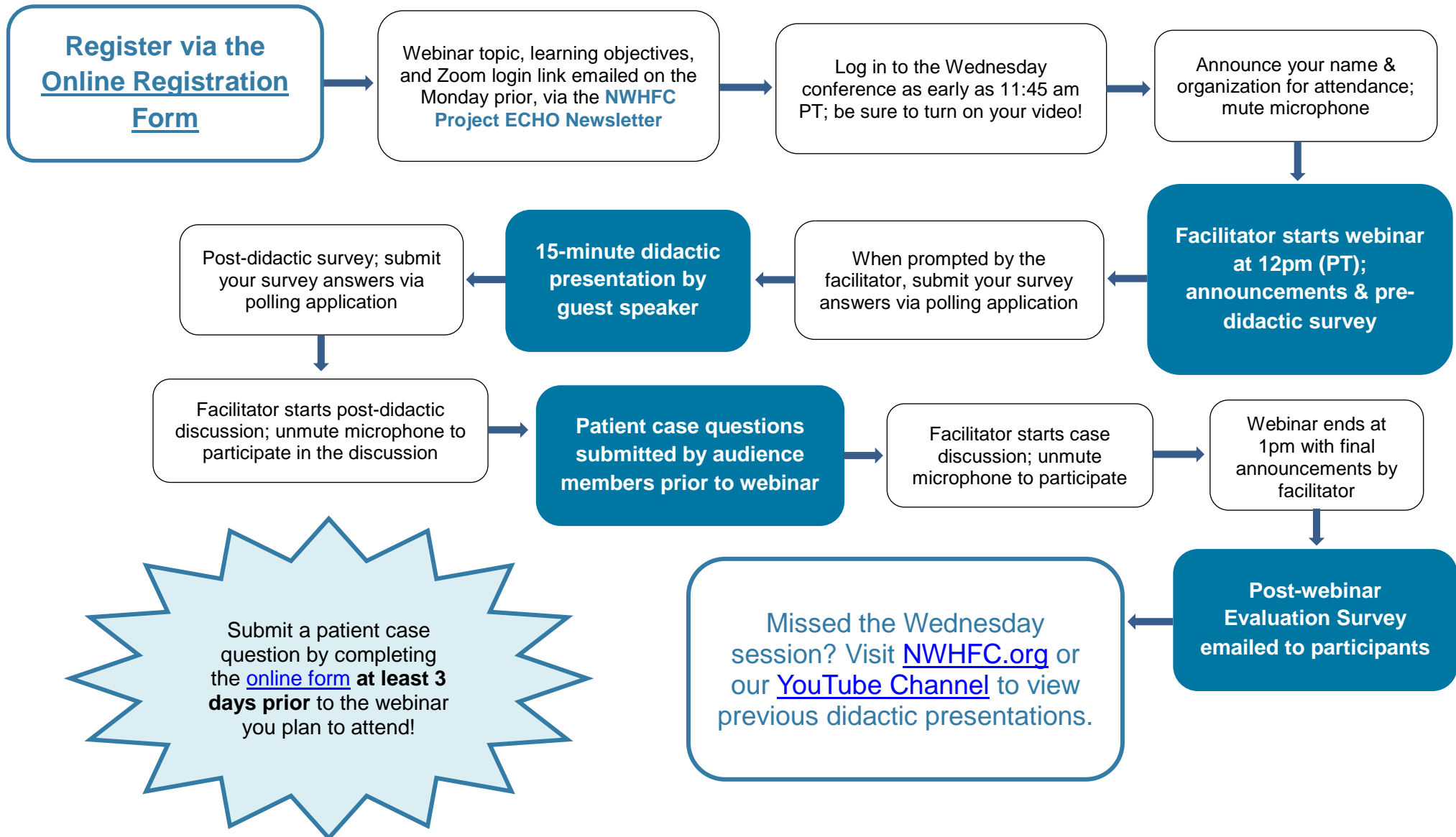
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## 2. NWHFC: Project ECHO Web Conference Diagram



### 3. Connecting to Web Conferences: Using Zoom on Desktop PC/Mac

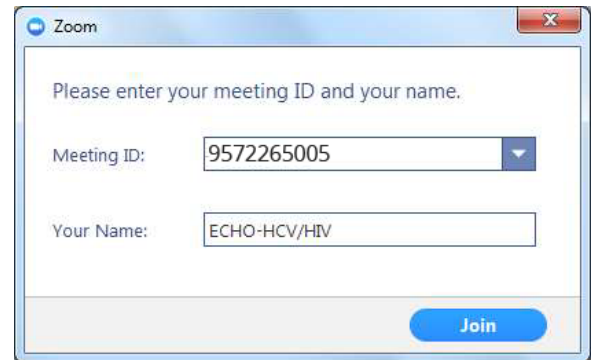
For best results, please use a hardwired connection. If not available, high-speed wireless should be sufficient.

You'll be prompted to run and install a small browser plug-in the first time you connect with a particular browser.

1) Click on the following URL to launch Zoom right into our specific meeting page:

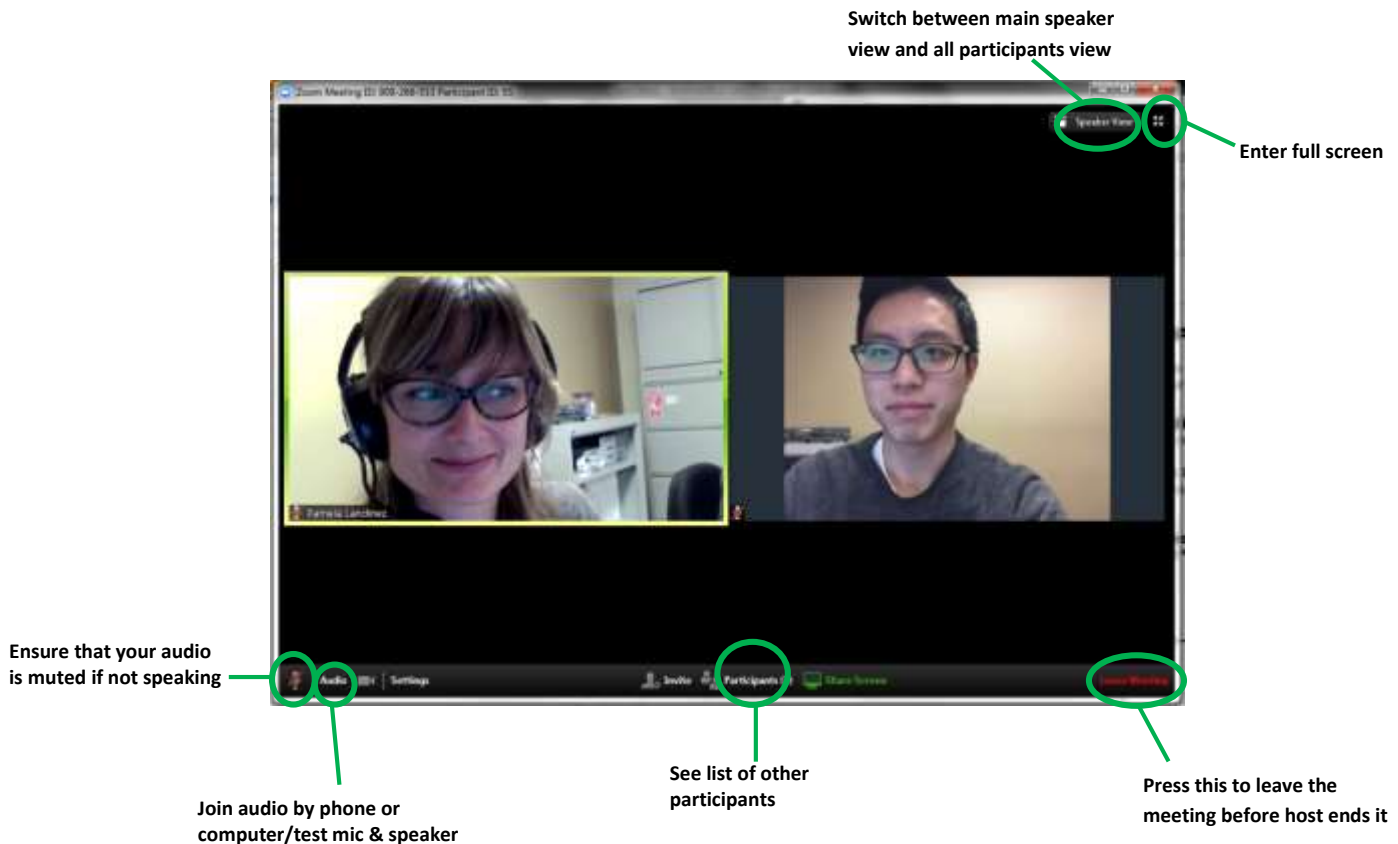
<https://zoom.us/j/9572265005>

The link/meeting ID is the same every time, and for your convenience we'll include this link in all of our weekly emailed agendas. If you choose to join the meeting from the main <http://zoom.us> webpage, simply enter **9572265005** as the 9-digit meeting ID under "Join a Meeting." There is no need to sign up, sign in, or otherwise establish any user account.



2) In the pop-up box, include your site name, your name, and the name of any other participants at your site in the "Your Name" box.

3) Refer to the graphic below for help with basic in-meeting functions.



# Using Zoom with an H.323 Connection

If you're using a Polycom, Lifesize, or Tanberg videoteleconferencing system, use these numbers to connect:

IP: 162.255.37.11

Meeting ID: 957 226 5005

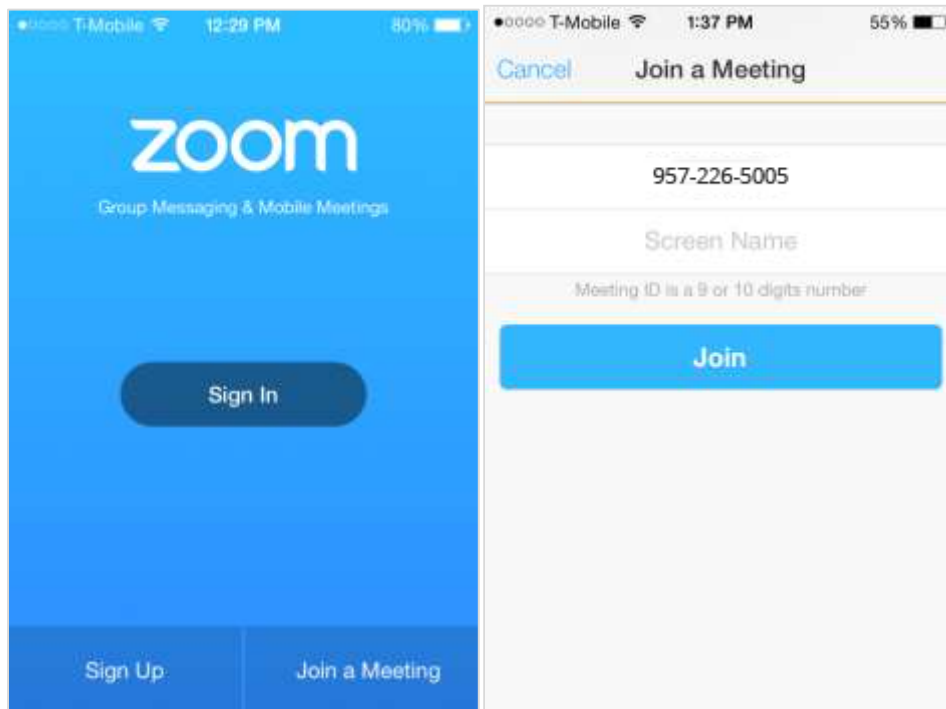
## Using Zoom on Mobile Devices (iOS and Android)

The Zoom Cloud Meetings app works on both Android and iOS mobile platforms for mobile and tablet devices. For best results, please maintain a connection to high-speed wireless. For additional information, please see the iOS/mobile section of the Zoom Support Website:

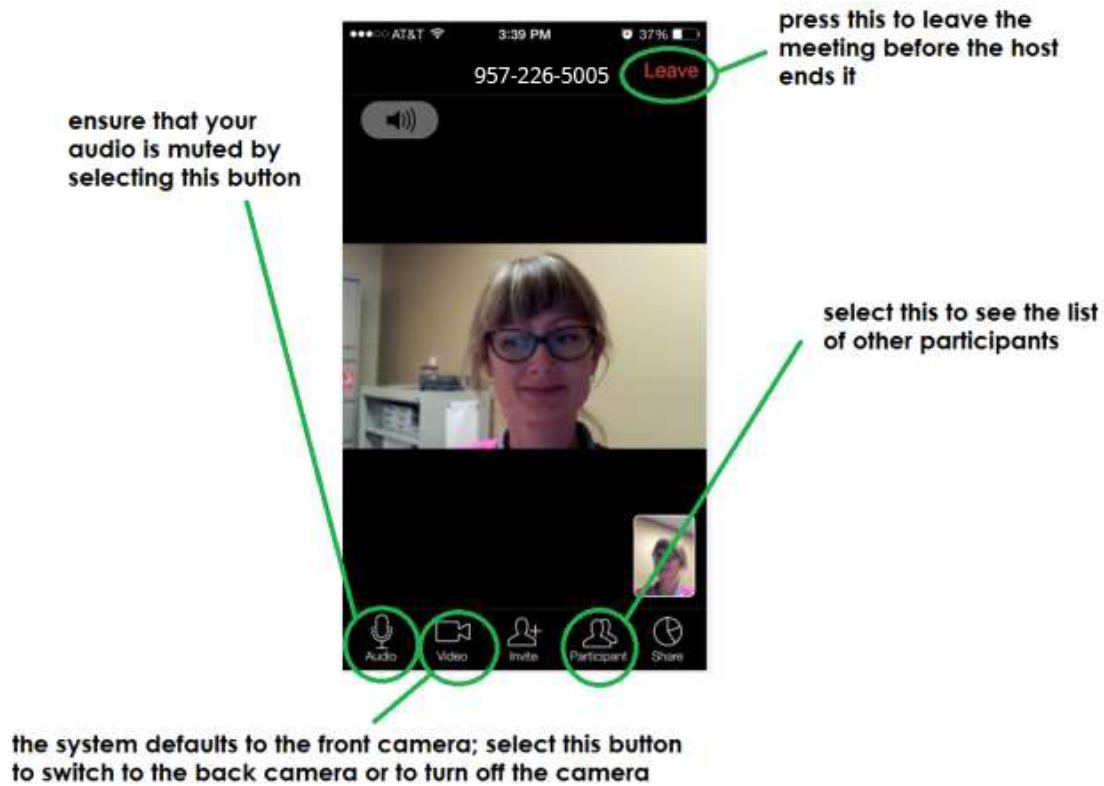
<https://support.zoom.us/hc/en-us/categories/200110013-iOS-and-Android>

1) Download the app from the Apple Appstore or Google Play by searching "Zoom".

2) Open the Zoom app and choose **Join a Meeting**. There is no need to sign up, sign in, or otherwise establish any user account before joining a meeting. To join the ECHO conference meeting, enter in the 9 digit meeting ID **957 226 5005** and enter your name and your site name under your screen display.



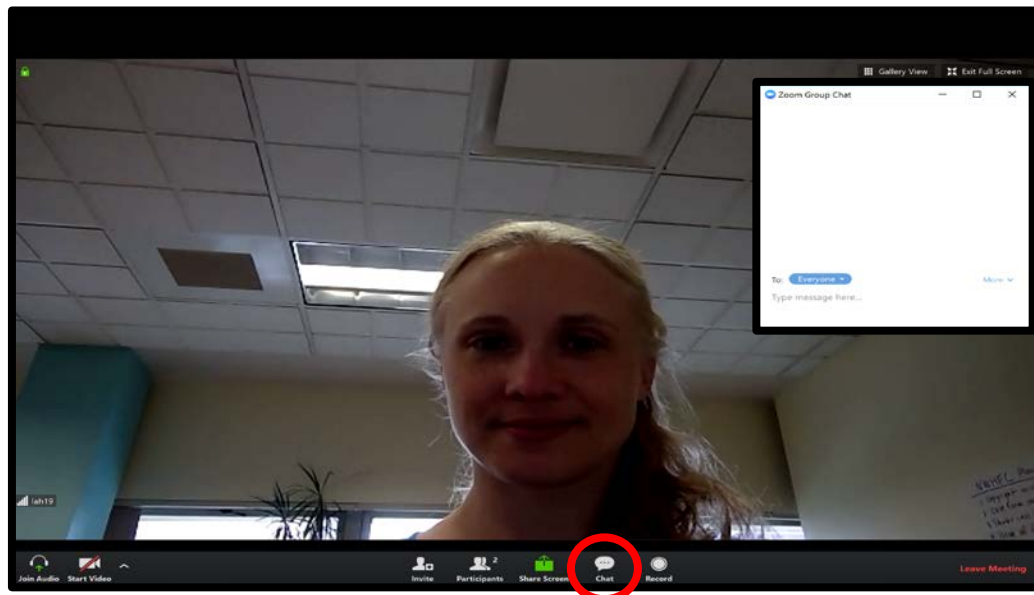
3) In the meeting, the layout of the interface is the same for both iOS and Android devices.



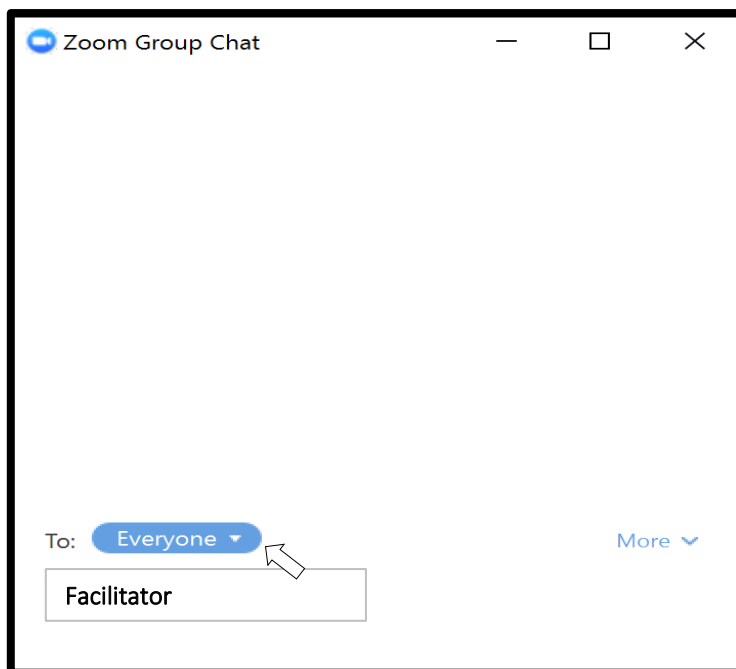
4) If your audio is disconnected, you will be prompted to choose an option for your audio. Choose Call using Internet Audio on iOS devices or Call via Device Audio on Android devices to use your phone's internal microphone.

## Using Zoom Chat Function

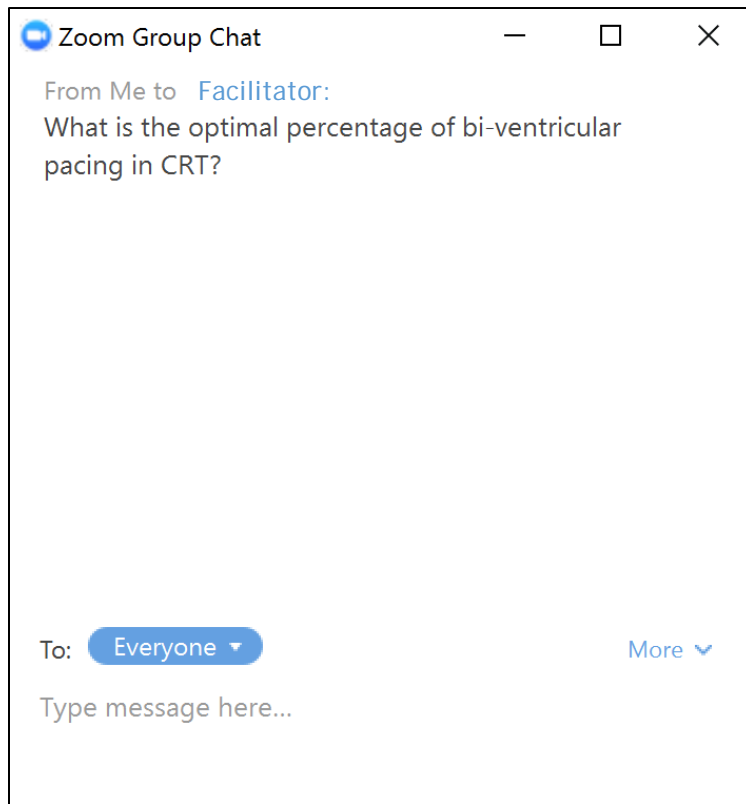
1. Click on the “Chat” button (circled in red below) to display text box



2. Change recipient from “Everyone” to “Facilitator” by clicking on the dropdown menu in the “To:” field. You may choose to send the message to everyone if you would like to share your question with all webinar audience members.



3. Type message into text box and press “Enter.”



4. Be prepared for the Panel Facilitator to call on you; be sure to unmute your microphone before speaking.



#### 4. Submitting Patient Case Questions

Do you need advice on patient care management from a panel of heart failure specialists? Or do you have an interesting patient experience you would like to share with the NWHFC learning community? Discussions on patient experiences submitted from audience members are the highlight of our webinar series and help us create an engaged, collaborative learning community.

**Submit a case or question today and receive a  
\$15 [Tango Gift Card](#)!**

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- 1) Complete the online [patient case form](#) no later than the Monday prior to the Wednesday webinar you plan to attend.
    - It's helpful to include as much information as possible, but you do not need to complete the entire form.
  - 2) Please connect to the session 15-30 minutes before the official start time and let us know in advance if you need to present at a specific time; we'll do our best to accommodate that request. When we call on you to present, make sure to unmute your microphone.
  - 3) If you have additional questions about this process or encounter issues with the form, you email at us [NWHFC@uw.edu](mailto:NWHFC@uw.edu).
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**We thank you for your contribution to our learning community!**



For staff use only:

NWHFC ID#: \_\_\_\_\_

### CONSULTATION REQUEST FORM

Please complete all items on this form and return to: NWHFC@uw.edu

#### PROVIDER CONTACT INFORMATION

First name:	Last name:	Role:
Email:	Phone number:	Fax number:

#### CLINIC/FACILITY INFORMATION

Name:	Street address:	City, State, Zip:
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#### CONSULTATION INFORMATION

<u>Reason for consultation:</u> <input type="checkbox"/> Need assistance with heart failure diagnosis <input type="checkbox"/> Seek advice on medication <input type="checkbox"/> Request plan for referral <input type="checkbox"/> Other:	<u>Specific questions related to case:</u>
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When was this patient last hospitalized? (check one):

☐ Past 7 days                      ☐ Past 30 days                      ☐ Past Year

Age:		Gender		NYHA Class:		ACC Stage:	
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#### DEMOGRAPHICS (Required by grant)

<u>Race:</u> <input type="checkbox"/> American Indian/Alaska Native <input type="checkbox"/> Native Hawaiian/Pacific Islander <input type="checkbox"/> Asian <input type="checkbox"/> White <input type="checkbox"/> Black or African American <input type="checkbox"/> Unknown	<u>Ethnicity:</u> <input type="checkbox"/> Hispanic/Latino <input type="checkbox"/> Not Hispanic/Latino <input type="checkbox"/> Unknown
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#### PHYSICAL EXAM

Height:	Weight:	Heart rate:	Rhythm:	Blood pressure:
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#### LABS

Sodium:	Creatinine:	BNP:
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#### MEDICATIONS (Name and dosage preferred but not required):

<input type="checkbox"/> ACE Inhibitors:	<input type="checkbox"/> Anti-coagulants:	<input type="checkbox"/> Diuretics:
<input type="checkbox"/> Aldosterone blocker:	<input type="checkbox"/> Beta blocker:	<input type="checkbox"/> ARBs:

#### DRUG USE

<input type="checkbox"/> Alcohol	<input type="checkbox"/> Tobacco	<input type="checkbox"/> Marijuana	<input type="checkbox"/> Other:
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## 5. Patient Case Questions: Presentation Tips

1. **Know your Patient** – Do a quick review of your patient’s history of treatments, medications, and hospitalizations pertinent to your question.
2. **Know your Audience** – The web-conferences are open to all health care professionals as well as students. Please be mindful when using acronyms and jargon; be prepared to define or clarify specific words.
3. **Be Organized** –
  - a) Begin with a brief summary of the patient’s history including relevant details that help listeners focus on what is important.
  - b) Follow with your consult question.
  - c) You do not need to present every detailed, only present what matters.
4. **DO NOT include protected health information while discussing your patient case.**



## **6. Earning Continuing Medical Education (CME) Credit**

### **About CME Accreditation**

The University of Washington School of Medicine is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education.

The University of Washington School of Medicine designates this live activity for a maximum of 24 *AMA PRA Category 1 Credit*™. Clinicians should claim only the credit commensurate with the extent of their participation in the activity.

The 2017 – 2018 Program Year runs from June 2017 – June 2018. A total of 1.0 CME credit hour is available for each 1-hour online session. The minimum number of sessions an individual can attend within the program year is 1; maximum number is 24 sessions. For the 2017 – 2018 Program Year, letters of attendance will be sent to participants in July 2018.

### **How do I receive AMA Category 1 Credits™?**

1. Complete the NWHFC Project ECHO [Online Registration form](#).
2. Each time you join an online webinar session, be sure to announce your name and institution to note your attendance. If more than one person is participating with you, be sure to send an email to [nwhfc@uw.edu](mailto:nwhfc@uw.edu) and provide a list of attendees, including names and email addresses.
3. Complete the post-webinar evaluation survey. For CME credit, participants must be present for the entire duration of the web-conference and complete the post-webinar evaluation survey.
4. At the end of the program year, the NWHFC: Project ECHO will email you with an Attendance Verification form with the number of sessions (hours) you completed. Mail this form, along with a check for the appropriate fee, to:

**University of Washington Continuing Education Office  
Box 359441  
Seattle, WA 98195**

**How much does it cost?**

The cost for CME credit is a sliding fee between \$25 - \$45, depending on the number of sessions you attended.

**Northwest Heart Failure Collaborative-  
Project ECHO  
June 21, 2017- June 20, 2018  
DS1806**



## Attendance Verification for AMA Category 1 Credit

University of Washington School of Medicine CME Office and the AMA requires verification for the hours you participate in a CME activity designated for *AMA PRA Category 1 Credits™*.

**To receive your proper number of AMA credit hours:**

(CME certificates cannot be issued without submission of a completed form)

- legibly print your name
- indicate # of hours attended and sign on the line
- **enter your email address to obtain your certificate via the online portal**

The University of Washington School of Medicine designates this live activity for a maximum of 24.0 *AMA PRA Category 1 Credits*™. (Each session 1.0 credit)

06/21/2017 – 06/20/2018      I attended for \_\_\_\_\_ hours. \_\_\_\_\_  
(24.0 hours max)      **signature (required)**

PRINT

Your Name \_\_\_\_\_  
First Last (MD, DO, NP, PA, RN, etc.)

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_ ( ) \_\_\_\_\_ Email: \_\_\_\_\_

If you would like to receive a certificate of attendance for credit, please **complete this form and return to the CME Office with your check or credit card information.** Please make checks payable to the ***University of Washington.*** Once payment is received, your certificate will be available via the CME portal.

## Certificate Fees

\$25	8.0 hours or less
\$35	8.25-16.0 hours
\$45	16.25-64.0 hours
\$55	64.25-99.75 hours
\$65	100.0 hours or more

Mail to: University of Washington  
Continuing Medical Education  
Box 359558  
Seattle, WA 98195  
Phone: (206) 543-1050  
Fax: (206) 221-4525

☐ Enclosing Check (made Payable to the *University of Washington*).      ☐ VISA      ☐ Mastercard

Card Number	Exp. Date
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Billing Zip Code	CVV
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Signature \_\_\_\_\_