



# Tennessee

CHAPTER

## **2023 State Meeting Schedule & Registration**

**Friday, Nov. 3 and Saturday, Nov. 4**

**AC Hotel by Marriott Downtown Nashville**

**6.5 CME Hours**



## 2023 Tennessee ACC State Meeting Schedule

### **Friday Nov. 3**

6-8 pm Poster Session and Reception in the Exhibit Hall

### **Saturday, Nov. 4**

7-8 am Breakfast and Vendors

8-9 am **ACC Speaker**  
Nicole Lohr, MD, FACC,

9-9:30 am **Business of Medicine**  
John Young, MD, FACC

9:30-10 am **Cardio Obstetrics**  
Kathryn Lindley, MD, FACC, Nashville, TN

10-10:30 am Break

10:30-11 am **Deep Venous Disease**  
Hady Lichaa, MD, FACC, Murfreesboro, TN

11-11:30 am **Clinical Variability and Waste in Medicine**  
Furrukh Malik, MD, FACC, Nashville, TN

11:30-1 pm **Lunch**  
*Governor's Update*  
John Jefferies, MD, FACC, Memphis, TN  
*Lunch Presentation*

1-1:30 pm **Lp(a): What we should know and where we should go**  
Nathan C. Trentham, MD, FNLA

1:30-2 pm **Cardiogenic Shock**  
Muddassir Mehmood, MD

2-2:30 pm **Pearls and Pitfalls of ICD Interrogation**  
Rachel Schreier, ACNP-BC

2:30 -3 pm **Hypertrophic Cardiomyopathy**  
John Jefferies, MD, FACC

3 -4 pm **FIT Jeopardy**  
Timir Paul, MD FACC, Moderator, Nashville, TN  
Teams are required to register and participate in the State Meeting

# Registration

## Registration includes the following:

- Friday Reception & Poster Session
- Saturday breakfast and lunch
- 6.5 CME Credits

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Suffix \_\_\_\_\_ Credentials \_\_\_\_\_

Company/Institution \_\_\_\_\_

Title \_\_\_\_\_

## Specialty

- |   |   |
|---|---|
| <input type="checkbox"/> Cardiologist               | <input type="checkbox"/> Pharmacist       |
| <input type="checkbox"/> Physician                  | <input type="checkbox"/> Tech             |
| <input type="checkbox"/> Nurse                      | <input type="checkbox"/> Practice Manager |
| <input type="checkbox"/> Advanced Practice Provider | <input type="checkbox"/> Other _____      |

Address: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Email Address \_\_\_\_\_

Work Phone \_\_\_\_\_ Cell Phone \_\_\_\_\_

**Special Needs: Please inform us of any special needs you might have to participate in this meeting (physical, dietary, etc.)**

## Registration

- |  |  |
|--|--|
| <input type="checkbox"/> ACC physician member (\$99)                   | <input type="checkbox"/> Non-Member CCA, PA, RN, Pharmacists, Techs (\$55) |
| <input type="checkbox"/> Physician non-member (\$150)                  | <input type="checkbox"/> Fellows-In-Training and Students (\$0)            |
| <input type="checkbox"/> Member CCA, PA, RN, Pharmacists, Techs (\$40) |  |

## Payment Type

- Check     Credit Card

Card Billing Address: \_\_\_\_\_

Name On Card \_\_\_\_\_

Credit Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CCV \_\_\_\_\_

**Email form to [bhilt@tnacc.org](mailto:bhilt@tnacc.org) or mail to TNACC, 5133 Harding Pike, B-10 #380, Nashville TN 37205**