

NEWS TO USE

New! Diagnostic Notepad

A new Diagnostic Notepad developed by members of the Early Diagnosis Campaign is now available for request by PHA members. Each page contains images of the heart and lungs and space to record notes and test results, and is designed to provide a visual aid for conversations with your patients. The back of each page also contains links to PHA's web resources. For more information, please contact earlydiagnosis@phassociation.org. (35 sheets/pad)

PHA's 2015 PHPN Symposium: SUBMIT AN ABSTRACT!

PHA's 2015 PH Professional Network Symposium will be held September 17-19, 2015 in Arlington, Va. This is an event primarily for nurses, nurse practitioners, physician assistants, pharmacists, respiratory therapists, social workers, and other healthcare professionals. Attendees will have the opportunity to network with other healthcare professionals at Symposium meet-ups and committee gatherings and earn continuing education credits. Abstracts or case studies for the

Symposium Poster Session must be submitted by May 15, 2015. For more about abstracts visit www.PHAAssociation.org/Symposium/Abstracts. Registration for attending the symposium opens March 2015.

New! Courses on PHA Online University:

Drugs, Toxins, and PAH

Roham Zamanian, MD, Stanford University

[www.PHAOnlineUniv.org/](http://www.PHAOnlineUniv.org/DrugsToxinsPAH)

DrugsToxinsPAH

1. Discuss drugs and toxins that are definite and likely risk factors for PAH
2. Explain how selective serotonin reuptake inhibitor use is related to PAH
3. Describe possible mechanisms for the development of drug-and-toxin-related PAH

Gender and PAH

Eric Austin, MD, Vanderbilt University

[www.PHAOnlineUniv.org/](http://www.PHAOnlineUniv.org/GenderAndPAH)

GenderAndPAH

1. Identify the major risk factors for PAH

2. Recognize how PAH disproportionately affects females, with more females currently affected for most types of PAH
3. Recognize that while the prevalence of PAH is higher among females, this does not necessarily mean that females have more severe disease or a more rapid disease progression

Pulmonology Clinical Vignettes

Various Authors

[www.PHAOnlineUniv.org/](http://www.PHAOnlineUniv.org/PulmonologyClinicalVignettes)

PulmonologyClinicalVignettes

1. Discuss the hemodynamic, echocardiographic and clinical factors associated with Group 3 pulmonary hypertension
2. Identify clinical and pathological findings in pulmonary veno-occlusive disease
3. Evaluate the hemodynamic profile of portopulmonary hypertension and other high flow conditions
4. Elucidate critical care management of Pulmonary Arterial Hypertension patient

ERRATUM

In "Ask the Expert" on page 92 of Volume 13, Number 2, the sentence beginning on the 15th line of the right-hand column should read: "In AMBITION, first-line treatment with a combination endothelin receptor antagonist (ERA, ambrisentan) and concomitant phosphodiesterase type 5 inhibitor (PDE-5i, tadalafil) was compared with either medication alone as first-line therapy for World Health Organization (WHO)/New York Heart Association (NYHA) functional class II-III symptoms."

Advances in Pulmonary Hypertension regrets this error. The online version has been corrected and can be viewed at <http://www.phaonlineuniv.org/Journal>