Upon viewing webinar please complete evaluation and then return to the office of Professional & Community Education in order to receive certificate of completion. Completed evaluation may be emailed (CE@mail.wvu.edu), faxed (304.293.5936) or mailed (WVU, PO Box 6830, Morgantown, WV 26506-6830).

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Name: Program Title: "When Your F			Date:	//
Speaker(s): Tania Baber, MD Objectives:				
At the conclusion of this program	n,participants should	d be able to:		
1. Evaluate possible etiologies o	of palpitations			
Discuss work up for palpitation	ons			
3. List treatment options for com	mon causes of palp	itations		
Overall Presentation				
The presentation objectives was Agree Somewhat	vere met. nat Agree	Disagree	Strongly Disagree	
2. Briefly summarize what you ha	ave learned about so	ome common causes	of heart palpitations.	
3. What are some of common	treatment plans for	r palpitations?		
How can attending this program	affect your current p	practice and/or position	on?	
What will you do differently in yo	ur practice and/or p	osition as a result of	your attendance in this prog	ram?