



DISCUSSION QUESTIONS

The following questions have been developed to guide interactive discussions at each table. Please identify one representative to take notes and present a summary at the conclusion of the breakout.

SESSION 1: BRIDGING THE GAP - WHERE PATIENTS, CLINICIANS, AND TECHNOLOGY MEET

1. Are prevention and health the same thing, and do patients and clinicians view them differently?
2. What types of support would make ASCVD primary prevention realistic for patients balancing competing lifestyle, work, family, and health priorities?
3. Are we overwhelmed by health data, or can AI help turn it into better preventive care? Consider: EHR data, wearables, and personal health data over the next decade.
4. How can we help patients visualize the long-term benefits of preventive action taken today, rather than simply communicating cardiovascular risk?
5. What must happen after an EHR risk signal emerges to prompt sustained preventive action from a patient, and how can clinicians and systems catalyze this?
6. How do we help patients zoom out from popularized wellness trends and claims and understand their place in the broader context of health?



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SESSION 2: TOWARD A PREVENTION-PROFICIENT HEALTH SYSTEM AND SOCIETY

1. If the U.S. adopted a midlife prevention checkpoint, what should it include?
2. Which solutions can be implemented now, and which require broader systemic changes? What economic forces are at play? Consider: Payment, policy, regulatory, communities, and the built environment.
3. Who owns prevention in a prevention-proficient healthcare system, and how should responsibilities be shared among patients, clinicians, health systems, payers, employers, communities, and policymakers?
4. How should we measure prevention success in an era focused on longevity? Beyond preventing individual events, what outcomes best capture extended health span, preserved function, and longer, healthier lives?
5. When the evidence tells us a strategy is useful, how should health systems respond and adapt? How do we resolve the tension between innovation and evidence generation?
6. Should our gold standards for measuring outcomes (e.g., MACE, ASCVD events) and generating evidence (e.g., RCTs) evolve to better align with the needs of patients and clinicians?