



A NON-PROFIT ORGANIZATION

## PRIMARY CARE CONFERENCES

EXCEPTIONAL CME | EXTRAORDINARY LOCATIONS

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### **INTERNAL MEDICINE FOR PRIMARY CARE: CARDIOLOGY/NEUROLOGY/PULMONOLOGY/RHEUMATOLOGY**

**London, United Kingdom – Grosvenor House, A JW Marriott Hotel  
August 5 – 8, 2019**

**Monday, August 5th:**

**7:00 am – 7:30 am**

**Registration and Breakfast**

**7:30 am – 8:30 am – Cardiology**

**Work-up of Patients with Suspected CAD: Which Tests for Which Patients**

Risk factor evaluation; symptom evaluation; test selection including stress ECG, echo, nuclear and newer imaging modalities; role of CRP and EBCT; evaluating women – who needs coronary angiography?

**8:30 am – 9:30 am – Cardiology**

**Congestive Heart Failure**

Etiologies and stages of heart failure; clinical evaluation; LV systolic vs. diastolic dysfunction; treatment including ACE inhibitors, ARBs, beta blockers; ACC/AHA Heart Failure Guideline Update

**9:30 am – 9:40 am**

**Coffee Break**

**9:40 am – 10:40 am – Cardiology**

**Cardiac Disease Prevention for Primary Care**

Lifestyle and pharmacologic approaches for prevention of CAD and heart failure; Role of physical activity; Control of hypertension; Approach to diabetes care

**10:40 am – 11:40 am – Rheumatology**

**Primary Care Approach to Inflammatory Arthritis**

Clinical presentation and laboratory work-up for rheumatoid arthritis, systemic lupus erythematosus, spondyloarthropathies (SPA), infectious arthritis and systemic sclerosis; Treatment of RA with DMARDs; and treatment principles of SLE, Sjogrens, SPA and PMR

**11:40 am – 12:40 pm – Rheumatology**

**Osteoarthritis**

Pathogenesis, diagnosis and treatment

**12:40 pm**

**Session Adjourns**

**Tuesday, August 6th:**

**7:00 am – 7:30 am**

**Arrival and Breakfast**

**7:30 am – 8:30 am – Rheumatology**

**Update in Pharmacology for Arthritis**

Review risks and benefits of traditional NSAIDs and cox-2 inhibitors; analgesics (narcotics and tramadol) and acetaminophen

**8:30 am – 9:30 am – Rheumatology**

**Fibromyalgia**

Differential diagnosis and treatment of this difficult-to-manage pain syndrome; Treatment options of anti-epileptics and SNRI's

**9:30 am – 9:40 am**

**Coffee Break**

**9:40 am – 10:40 am – Cardiology**

**Arrhythmia Management for Primary Care**

Types and symptoms of arrhythmias; approach to the patient; when to refer, when to admit; atrial fibrillation; ventricular arrhythmias – when are they serious?

**10:40 am – 11:40 am – Pulmonology**

**Asthma**

The medical impact of asthma; fundamental role of inflammation, with possible scarring and irreversible loss of lung function; practical points of diagnosis; goal setting management based on levels of severity; risk factors for mortality and treatment in the acute setting; management options for the difficult to control asthmatic patient

**11:40 am – 12:40 pm – Pulmonology**

**Controversies in the Treatment of Common Respiratory Infections**

Acute and chronic bronchitis; pneumonia (community versus hospital-acquired); role of the Pneumonia Severity Index score in determining indication for hospitalization; cost-effective use of antibiotics; clinical significance of drug resistance; guidelines for management

**12:40 pm**

**Session Adjourns**

**Wednesday, August 7th:**

**7:00 am – 7:30 am**

**Arrival and Breakfast**

**7:30 am – 8:30 am – Pulmonology**

**Everything You Need to Know About COPD**

Definition; pathophysiology; early detection and intervention; risk reduction; management update including new modalities (including lung volume reduction surgery) and the role of inhaled corticosteroids and domiciliary oxygen

**8:30 am – 9:30 am – Pulmonology**

**A Primary Care Approach to Lung Cancer Screening and Pulmonary Nodules**

Appropriate use of the new lung cancer screening recommendations; Fleischner Society guidelines and American College of Chest Physician Lung Cancer guidelines; approach to definitive evaluation and management strategies

**9:30 am – 9:40 am**

**Coffee Break**

**9:40 am – 10:40 am – Neurology**

**The Neurological Exam**

Characteristics and objectives of the examination; exam phases; assessing general mental status; long-term predications; examination of infants; demonstration on conducting an exam

**10:40 am – 11:40 am – Neurology**

**Evaluating Weakness**

Using the history and physical examination to distinguish weakness from non-specific symptoms; characteristics of neurological diseases that produce weakness; presentations of representative diseases of the nervous system

**11:40 am**

**Session Adjourns**

**Thursday, August 8th:**

**7:00 am – 7:30 am**

**Arrival and Breakfast**

**7:30 am – 8:30 am – Neurology**

**Epilepsy, Paroxysmal Disorders, and Status Epilepticus**

Types of paroxysmal disorders; diagnosis of seizures; seizures vs. epilepsy; classification of seizures and epileptic syndrome; initiation and discontinuation of drug therapy; therapeutic monitoring; intractable epilepsy

**8:30 am – 9:30 am – Neurology**

**Parkinson's Disease & Other Movement Disorders**

Epidemiology; cardinal features; secondary features; pathology; neurochemistry; differential diagnosis; treatment; complication; other movement disorders; neuroleptic-induced movement disorders; chorea

**9:30 am**

**Conference Adjourns**

### Target Audience

This program is targeted to office-based primary care providers and other health professionals with updates in primary care medicine

### Learning Objectives

Upon completion of this program, participants should be better able to:

- Describe current diagnostic approaches to arrhythmias, hypertension, ACS and CAD
- Implement treatment strategies reflective of current evidence-based medicine for arrhythmias, hypertension, ACS and CAD
- Evaluate and treat fibromyalgia
- Utilize current evidence to design treatment strategies for inflammatory arthritis and osteoarthritis
- Perform a neurological exam as well as distinguish signs of weakness and other neurological disorders
- Describe the differential diagnosis and treatment of movement disorders
- Identify the pathophysiology and diagnostic approach of asthma, COPD and common respiratory infections
- Design treatment strategies reflective of current evidence based medicine for asthma, COPD and common respiratory infections
- Perform a range of pulmonary diagnostics and be better prepared to handle lung cancer and other challenging pulmonary cases

### Learning Outcome

To provide updates in primary care medicine to office-based providers



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## Accreditation

### Physician Accreditation

Medical Education Resources is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

### Credit Designation

Medical Education Resources designates this live activity for a maximum of 16 *AMA PRA Category 1 Credit(s)*<sup>™</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### ABIM MOC Recognition

Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 16 (part II) MOC points in the American Board of Internal Medicine's (ABIM) Maintenance of Certification (MOC) program. Participants will earn MOC points equivalent to the amount of CME credits claimed for the activity. It is the CME activity provider's responsibility to submit participant completion information to ACCME for the purpose of granting ABIM MOC credit.



### American Academy of Family Physicians

This Live activity, *Internal Medicine for Primary Care*, with a beginning date of August 5, 2019 has been reviewed and is acceptable for up to 16 Prescribed credits by the American Academy of Family Physicians. Physicians should only claim the credit commensurate with the extent of their participation in the activity.

### American Osteopathic Association

These programs are approved for 16 hours in Category 2-A by the American Osteopathic Association.

### American College of Emergency Physicians

This program is approved by the American College of Emergency Physicians for a maximum of 16 hours of ACEP Category I credit.

### Canadian Physicians

The College of Family Physicians of Canada (CFPC) has a reciprocal credit agreement with the American Academy of Family Physicians (AAFP) for activities which offer Prescribed credit. CFPC members who complete these conferences may claim the equivalent number of Mainpro-M1 credits.

### American Academy of Physician Assistants

AAPA accepts certificates of participation for educational activities certified for Category I credit from AOACCME, Prescribed credit from AAFP, and *AMA PRA Category 1 Credit(s)<sup>TM</sup>* from organizations accredited by ACCME or a recognized state medical society. Physician assistants may receive a maximum of 16 hours of Category I credit for completing this program.

### Nursing Accreditation

Medical Education Resources is accredited as a provider of continuing nursing education by the American Nurses Credentialing Center's Commission on Accreditation.

This CE activity provides 16 contact hours of continuing nursing education.

This activity is designated for 6.0 ANCC pharmacotherapeutic contact hours.

The American Academy of Nurse Practitioners (AANP) Certification Board recognizes and accepts continuing education (CE) contact hours from activities approved by AMA, ACCME, ANCC, AANP, AAFP and AACN.

Provider approved by the California Board of Registered Nursing, Provider Number 12299, for 16 contact hours.

### Pharmacy Accreditation



Medical Education Resources (MER) is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education. MER designates this continuing education activity for 16 contact hours (1.6 CEUs) of the Accreditation Council for Pharmacy Education.

Universal Program Number: 0816-0000-19-068-L01-P

Participants will be required to sign in at the start of the program and/or complete a program evaluation form.

Credits will be uploaded into CPE Monitor within 60 days of the activity.

This activity is certified as Knowledge-based CPE.