



**PRIMARY CARE CONFERENCES**  
EXCEPTIONAL CME | EXTRAORDINARY LOCATIONS

WWW.MER.ORG

**INTERNAL MEDICINE FOR PRIMARY CARE:  
GASTROENTEROLOGY/ORTHOPEDICS/  
TOXICOLOGY**

**Asheville, NC - The Omni Grove Park Inn  
5/20/2022 - 5/22/2022**

Friday, May 20, 2022

7:00 am

**Registration and Hot Breakfast**

7:30 am - 8:30 am - Toxicology

**An Office-Based Toxicology Overview**

Introduction to the workup of the toxic patient; Obtaining an adequate history and physical exam prior to calling poison control; Review of the classic five toxidromes including: cholinergic, anticholinergic, opiate, hypnosedative, and sympathomimetic; The more common toxic ingestions seen in the ED

8:30 am - 9:30 am - Toxicology

**Cocaine and Heroin Abuse from an ER Provider's Perspective**

The basics of cocaine and heroin intoxication in the acute care setting; The mechanisms of action and signs and symptoms of acute intoxication; The acute phenomena of cocaine induced chest pain, hypertensive emergency, aortic dissection, pneumonitis and placental abruption; Review of the history of heroin abuse in the US, the cutting agents and adulterants being added to heroin and some of the more esoteric sequelae of chronic opiate abuse

9:30 am - 9:40 am

**Coffee Break**

9:40 am - 10:40 am - Toxicology

**The Danger of "Legal Highs" in Both Adolescents and Adults**

Inhalant abuse and legal highs and drugs of abuse not yet scheduled by the DEA; Intoxicating inhalants that are ubiquitous in many households and easily accessed by adolescents; Dextromethorphan abuse and the unique psychoactive plants salvia divinorum, kratom, morning glory (LSA) and Jimsonweed; Mechanisms of action, signs and symptoms of intoxication and treatment

10:40 am - 11:40 am - Orthopedics

**The Shoulder: Anatomy, Common Injuries, and Exam Techniques**

Rotator cuff syndrome; impingement, frozen shoulder; subacromial bursitis; bicipital tendonitis; A-C joint disease

11:40 am - 12:40 pm - Orthopedics

**Knee Injuries**

A case presentation approach to the most common knee injuries physician will see in clinical practice; mechanism of injury, historical features, anatomy of injury, clinical findings evident in the exam; management of problems focused mostly on evidence based conservative interventions but also surgical options available; the top three: ACL, patellofemoral, meniscal

12:40 pm

**Session Adjourns**

**Saturday, May 21, 2022**

**7:00 am**

**Registration and Hot Breakfast**

**7:30 am - 8:30 am - Orthopedics**

**Ankle and Foot**

This presentation will address a series of common acute and chronic injuries and pain syndromes to the foot and ankle as they would present in the primary care setting. The focus will be on developing a working differential diagnosis based on the historical mechanism of injury and exam findings.

**8:30 am - 9:30 am - Orthopedics**

**Exercise as Medicine: Physical Activity Prescription**

Current recommendations for physical activity in adults and children will be discussed; discussion of health benefits of exercise in adults; lay out of recommendations for beginning competitive athletics and weight lifting in children; important discussion of evidence-based methods for motivating patients to be active and expose the problems caused by the “no pain, no gain” culture

**9:30 am - 9:40 am**

**Coffee Break**

**9:40 am - 10:40 am - Toxicology**

**Primary Care Update on Synthetic Drugs**

History of synthetic drugs of abuse in the US and EU; Synthetic drugs that mimic the effects of marijuana, stimulants, opiates, and hallucinogens; Synthetic cannabinoids (K2-Spice), novel stimulants (Bath Salts, Flakka), and novel hallucinogens (Molly, Benzofury)

**10:40 am - 11:40 am - Gastroenterology**

**Management of Lower GI Bleeding- From Occult to Massive**

The correct use and interpretation of tests for occult blood in the stool will be discussed in relation to lower GI bleeding; focus on the utility of different diagnostic and management approached to the spectrum of patients presenting with hematochezia

**11:40 am - 12:40 pm - Gastroenterology**

**Irritable Bowel Syndrome**

This topic will discuss the pathophysiology, clinical manifestations, diagnosis, and management of IBS.

**12:40 pm**

**Session Adjourns**



**Sunday, May 22, 2022**

**7:00 am**

**Registration and Continental Breakfast**

**7:30 am - 8:30 am - Gastroenterology**

**Colorectal Cancer Screening and Surveillance**

Reviews the most recent recommendations for CRC screening in the general population at average risk for CRC.

**8:30 am - 9:30 am - Gastroenterology**

**Approach to Abnormal Liver Function Tests and Non-Alcoholic Fatty Liver Disease (NAFLD)**

A primary care approach to evaluating and managing mildly abnormal hepatocellular liver chemistry in the asymptomatic patient; review of NAFLD, its implications and management

**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 Outcome**

To provide updates in primary care medicine to office based providers

### **Learning Objectives**

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

- List the classic 5 toxidromes and describe how to approach the poisoned patient
- Describe presentations of cocaine and heroin abuse
- List non-regulated agents of abuse in adolescents and adults and discuss their consequences
- Identify the key characteristics and effects of synthetic drugs, most notably synthetic cannabinoids and synthetic cathinones
- Diagnose and treat shoulder injuries
- Utilize observation, palpation, range of motion and neurologic exams to diagnose knee injuries
- Recognize chronic injuries and pain syndromes to the foot and ankle
- List strategies to promote exercise and physical activity in the general patient population
- List current treatment recommendations for the management of lower GI bleeding
- Evaluate the efficacy of treatment options for IBS
- Discuss the guidelines for colonoscopic colorectal cancer screening and surveillance
- Identify risk factors for the development of non-alcoholic fatty liver disease



### **Disclosure of Conflicts of Interest**

Medical Education Resources insures balance, independence, objectivity, and scientific rigor in all our educational programs. In accordance with this policy, MER identifies conflicts of interest with its instructors, content managers, and other individuals who are in a position to control the content of an activity. Conflicts are resolved by MER to ensure that all scientific research referred to, reported, or used in a CME activity conforms to the generally accepted standards of experimental design, data collection, and analysis. MER is committed to providing its learners with high-quality CME activities that promote improvements or quality in health care and not the business interest of a commercial interest.

### **Disclaimer**

The content, views and opinions presented in this educational activity are those of the authors and do not necessarily reflect those of Medical Education Resources. The authors have disclosed if there is any discussion of published and/or investigational uses of agents that are not indicated by the FDA in their presentations. Before prescribing any medicine, primary references and full prescribing information should be consulted. Any procedures, medications, or other courses of diagnosis or treatment discussed or suggested in this activity should not be used by clinicians without evaluation of their patient's conditions and possible contraindications on dangers in use, review of any applicable manufacturer's product information, and comparison with recommendations of other authorities. The information presented in this activity is not meant to serve as a guideline for patient management.

## Accreditation Statements

### Joint Accreditation for Interprofessional Continuing Education



JOINTLY ACCREDITED PROVIDER™  
INTERPROFESSIONAL CONTINUING EDUCATION

In support of improving patient care, Medical Education Resources is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

This activity was planned by and for the healthcare team, and learners will receive 12 Interprofessional Continuing Education (IPCE) credits for learning and change.

### Physician Credit Designation

#### AMA PRA Category 1 Credits™

Medical Education Resources designates this live activity for a maximum of 12 AP™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

### American Board of Internal Medicine MOC Recognition (ABIM)



Successful completion of this CME activity, which includes participation in the evaluation component, enables the participant to earn up to 12 (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 (AAFP)



This Live activity, *Internal Medicine for Primary Care: Gastro/Ortho/Tox*, with a beginning date of 5/20/2022 has been reviewed and is acceptable for up to 12 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 (AOA)

These programs are approved for 12 hours in Category 2-A by the American Osteopathic Association.

### American College of Emergency Physicians (ACEP)

This program is approved by the American College of Emergency Physicians for a maximum of 12 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.

### **Nursing Credit Designation**

#### **American Nurses Credentialing Center (ANCC)**

Medical Education Resources designates this live activity for a maximum of 12 ANCC nursing contact hours. Nurses will be awarded contact hours upon successful completion of the activity.

This activity is designated for 3.5 ANCC pharmacotherapeutic contact hours.

#### **American Academy of Nurse Practitioners (AANP)**

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.

#### **California Board of Registered Nursing**

Medical Education Resources is approved by the California Board of Registered Nursing, Provider Number 12299, for 12 contact hours.

### **Physician Assistant Credit Designation**

#### **American Academy of Physician Assistants (AAPA)**



Medical Education Resources has been authorized by the American Academy of PAs (AAPA) to award AAPA Category 1 CME credit for activities planned in accordance with AAPA CME Criteria. This activity is designated for 12 AAPA Category 1 CME credits. PAs should only claim credit commensurate with the extent of their participation.

### **Pharmacy Accreditation**

#### **Accreditation Council for Pharmacy Education (ACPE)**



Medical Education Resources (MER) designates this live continuing education activity for 12 contact hours (1.2 CEUs) of the Accreditation Council for Pharmacy Education.

Universal Program Number: JA0003680-0000-22-XXX-H01-P

JA0003680-0000-22-XXX-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.