



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

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## **INTERNAL MEDICINE FOR PRIMARY CARE: GERIATRICS/NEPHROLOGY/RHEUMATOLOGY**

**Asheville, NC - The Omni Grove Park Inn  
September 6 - 8, 2024**



**Friday, September 6, 2024**

**7:00 am**

**Registration 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), acetaminophen, conventional-synthetic DMARDs, and bDMARDs

**8:30 am - 9:30 am - Rheumatology**

**Osteoporosis**

Review the epidemiology and pathophysiology of osteoporosis along with interpretation of DEXA scans and FRAX risk assessment; up-to-date therapeutic options

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

**Coffee Break**

**9:40 am - 10:40 am - Rheumatology**

**Crystal Disease: Gout & Pseudogout**

Properly diagnosing and treating crystal diseases such as gout and pseudogout

**10:40 am - 11:40 am - Geriatrics**

**Heart Failure: Assessment and Management of the Most Expensive Disease in Older Adults**

Recognition of the high mortality associated with heart failure; Understanding how to diagnose heart failure and the difference between reduced ejection fraction and preserved ejection fraction heart failure; Evidence based treatments available for heart failure

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

**Alzheimer's & Other Dementias**

Review of normal age-related changes in cognitive function as well as disorders of memory and cognition as part of dementing illness; Mental status exams, including their limitations in evaluating memory; Various types of dementia and the importance of an accurate diagnosis; Current treatment options for various kinds of dementia; Potentially reversible dementias; The responsibilities of healthcare providers in managing patients with dementia

**12:40 pm**

**Session Adjourns**

**Saturday, September 7, 2024**

**7:00 am**

**Registration and Breakfast**

**7:30 am - 8:30 am - Geriatrics**

**Controversies in the Management of Hypertension in Older Adults: How Low is Too Low?**

Best evidence for treatment goals for hypertension in diabetics and those with previous stroke; Controversial evidence for the various guidelines for diagnosing and treating hypertension in older adults; Best evidence-based medications for hypertension

**8:30 am - 9:30 am - Geriatrics**

**Urological Disorders**

Review of two very common conditions seen in the elderly population: benign prostatic hyperplasia (BPH), and urinary incontinence; Pathogenesis, clinical symptoms, recommended evaluation and management options for BPH; Review of the anatomy and mechanism of normal urinary function, causes of incontinence, the evaluation and management

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

**Coffee Break**

**9:40 am - 10:40 am - Rheumatology**

**Differential Diagnosis of Inflammatory Arthritis**

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

**10:40 am - 11:40 am - Nephrology**

**Kidney, Heart, and Bone: A Challenging Trifecta in CKD**

Cardiovascular calcifications are highly prevalent in patients with kidney disease and contribute to morbidity and mortality. In recent years, the complex pathophysiologic changes occurring in the bony tissue of patients with kidney disease have been recognized as important factors in vascular calcifications. Early recognition of this disorder is becoming an important component of the care of CKD patients.

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

**Hematuria and Proteinuria**

Hematuria and proteinuria are two of the most common abnormalities in routine urinalysis that require further evaluation by providers. There is a broad spectrum of disease that can give rise to blood and protein in the urine ranging from benign to rapidly progressive kidney failure. This presentation will discuss the detection, diagnosis and management of these findings including when to ask a specialist for help.

**12:40 pm**

**Session Adjourns**

**Sunday, September 8, 2024**

**7:00 am**

**Registration and Breakfast**

**7:30 am - 8:30 am - Nephrology**

**Glomerulonephritis 101**

Differentiating glomerulonephritis and secondary glomerulonephritis in lupus or diabetes; dealing with high blood pressure, nephrotic syndrome and other complications; the appropriateness of tests, imaging and biopsy; treatment options

**8:30 am - 9:30 am - Nephrology**

**Primary Care Primer on Electrolyte Imbalances**

Electrolyte and acid-base disorders are common in clinical practice and can arise from genetic and acquired disease as well as commonly prescribed medications. These include disturbances in serum sodium, potassium, calcium and bicarbonate. This case-based lecture will review the pathophysiology, diagnosis, prevention and management of these common imbalances.

**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:

- Review the risks and benefits of the treatment options for arthritis (non-selective NSAIDs, cox-2 inhibitors, DMARDs, narcotics and tramadol)
- Identify the risks and benefits of utilizing bisphosphonates in the treatment of osteoporosis
- Diagnose and treat gout and pseudogout
- Describe the differential diagnoses of inflammatory arthritis based on clinical presentation and laboratory workup
- Describe the assessment and management of heart failure in older adults
- Diagnose and treat cognitive impairment, dementias, and Alzheimer's disease
- Evaluate hypertension in elderly patients and recommend appropriate treatment based on individual risk factors
- Describe the primary care work-up of incontinence in older adults
- List steps to diagnose and treat bone disease and its cardiovascular consequences in CKD
- Identify causes of hematuria and proteinuria
- Describe treatment options for hematuria and glomerulonephritis
- Review the pathophysiology, diagnosis, prevention and management of common electrolyte imbalances

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

Medical Education Resources insures balance, independence, objectivity, and scientific rigor in all our educational activities. 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. Reported conflicts of interest are mitigated by MER to ensure that all scientific research referred to, reported, or used in a CE activity conforms to the generally accepted standards of experimental design, data collection, and analysis. MER is committed to providing learners with high-quality CE activities that promote improvements or quality in health care and not the business interest of a commercial interest.

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## 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 *AMA PRA Category 1 Credits™*. 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: Geri/Nephro/Rheum*, with a beginning date of September 6, 2024 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 6.5 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: JA0003680-0000-24-XXX-L01-P

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

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

This activity is certified as Knowledge-based CPE.