



**INTERNAL MEDICINE FOR PRIMARY CARE:
CARDIOLOGY/EAR NOSE AND THROAT/
NEPHROLOGY/ORTHOPEDICS**

**Nassau, Bahamas - Atlantis Paradise Island Resort
May 15 - 18, 2025**

Thursday, May 15, 2025

7:00 am

Registration and Breakfast

7:30 am - 8:30 am - Nephrology

Hematuria and Proteinuria

Hematuria and proteinuria are two of the most common abnormalities in routine urinalysis that require further evaluation. 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 discusses the detection, diagnosis and management of these findings including when to ask a specialist for help.

8:30 am - 9:30 am - Nephrology

Blood Pressure Control in Kidney Disease

Review of blood pressure basics; Discussion of the AHA guidelines for diagnosis of primary and secondary hypertension; Discussion of key clinical trials in patients with and without kidney disease; Medication choices, clinical targets and general considerations when treating patients' hypertension with and without diabetes

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - Nephrology

Detecting, Diagnosing, and Managing the Diabetic Patient with Kidney Disease

Chronic kidney disease attributed to diabetes is the leading cause of kidney failure globally. The disease is incurable and kidney disease once established typically progresses and is associated with excessive morbidity and mortality. This presentation will provide up to date information on how to detect, diagnose and manage diabetic kidney disease and review recent clinical trials designed to improve kidney outcomes.

10:40 am - 11:40 am - ENT

Evaluation of the Neck Mass

Patients presenting with masses in the neck are challenging and worrisome. The diagnostic and therapeutic process is described. A method for evaluating the mass, guidance on when imaging studies are indicated, and when immediate or routine referral to ENT becomes appropriate is discussed.

11:40 am - 12:40 pm - ENT

Antimicrobial Therapy in Treating Sinusitis

Symptoms, signs and examination findings helpful in diagnosing sinusitis are outlined. When to use systemic and topical agents as well as emerging resistance to these agents is discussed. Imaging studies and proper referral to specialists is described with clarity.

12:40 pm

Session Adjourns

Friday, May 16, 2025

7:00 am

Registration and Breakfast

7:30 am - 8:30 am - ENT

Allergic Rhinitis

The lecture will focus on a review of the basic allergic pathways that affect the body. Special emphasis will be given to the nasal and sinus regions, with discussion to include diagnostic testing and modes of treatment, including avoidance, pharmacotherapy and immunotherapy

8:30 am - 9:30 am - ENT

A Primary Care Approach to Sudden Hearing Loss

When a patient presents with sudden hearing loss, accurate differentiation of sensorineural versus conductive loss is essential. Techniques to make that differentiation, testing and treatment strategies will be discussed; Urgent treatment and when to refer for audiometric testing and ENT referral will be outlined

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - Nephrology

A Primary Care Approach to Mild to Moderate Chronic Kidney Disease

Chronic kidney disease affects one in six people; It is important for the primary care provider to know the complications from mild to moderate chronic kidney disease and be part of the team planning for potential renal replacement therapy; Exploration of electrolyte abnormalities, acid base imbalances, bone mineral disorders, anemia management; Planning for eventual kidney transplantation or dialysis

10:40 am - 11:40 am - Cardiology

Acute Coronary Syndromes: The Patient with Acute Chest Pain

Diagnosis and initial evaluation in the primary care setting, urgent care clinic and emergency department; Initial workup, treatment, and follow-up; Diagnosing and treating ST segment elevation and non-ST segment elevation MIs; The role of drug therapy--primary vs adjunctive to PCI; Follow up after acute coronary syndrome

11:40 am - 12:40 pm - Cardiology

Primary & Secondary Prevention of CAD

AHA/ACC and other lipid guidelines updates; HDL Cholesterol: The good cholesterol?; The role of triglycerides in ASCVD--who to treat; Metabolic syndrome and/or obesity; Who needs treatment and how much; The role of lifestyle changes, exercise and cardiac rehabilitation; The use of vitamin D and supplements for cardiology patients; Drug therapy updates

12:40 pm

Session Adjourns



Saturday, May 17, 2025

7:00 am

Registration and Breakfast

7:30 am - 8:30 am - Cardiology

Heart Failure

Etiologies and stages of heart failure; ACC/AHA Heart Failure guidelines; Heart failure with reduced EF (LVrEF) and heart failure with preserved EF (HFpEF); Determining patients for referral using biomarkers; Treatment options: ACE inhibitors, ARBs, beta blockers, mineralocorticoid receptor antagonists; The role of devices in treatment and Anticoagulation and antiplatelet drugs; Issues related to the hospitalized patient with acute decompensated heart failure

8:30 am - 9:30 am - Cardiology

Hypertension

The latest 2017 Multisociety Hypertension Guidelines; Updates after the guidelines; Approaches to treatment-thresholds and goals; Choices for initial and combination therapy; Resistant hypertension; Treating special populations: diabetics, the elderly, patients with renal failure

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - Orthopedics

The Shoulder: Anatomy, Common Injuries, and Exam Techniques

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

10:40 am - 11:40 am - Orthopedics

Wrist, Hand, and Fingers

Carpal tunnel, CMC arthritis thumb, ganglion cyst, trigger finger, de Quervains disease.

11:40 am

Session Adjourns



Sunday, May 18, 2025

7:00 am

Registration and Breakfast

7:30 am - 8:30 am - Orthopedics

The Knee: Anatomy, Common Injuries, and Exam Techniques

ACL, meniscus, MRI; common sports injuries; osteoarthritis and hyaluronan; bursitis: prepatellar, pesanserine; baker's cyst; joint injection/X-ray interpretation; pediatrics

8:30 am - 9:30 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.

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 and the role of drug therapy to the patient with acute chest pain
- Implement lifestyle changes as well as lipid and cholesterol guidelines for the prevention of CAD
- Implement treatment strategies reflective of recent guidelines and current evidence based medicine for heart failure
- Explain current concepts in the diagnosis and treatment of hypertension
- Identify when imaging and/or referral to an ENT is necessary for patients presenting with a neck mass
- Recommend appropriate systemic and/or topical antimicrobial agents for the treatment of sinusitis
- Review the basic allergic pathways that affect the body, with particular emphasis on the nasal and sinus regions
- Accurately differentiate between sensorineural and conductive hearing loss
- Identify causes of hematuria and proteinuria
- Discuss the findings of key clinical trials in the treatment of hypertensive patients with and without kidney disease
- Identify strategies to detect and treat diabetic kidney disease
- Describe potential complications from chronic kidney disease and options for potential renal replacement therapy
- Diagnose and treat shoulder injuries
- Diagnose and treat wrist, hand, and finger injuries
- Describe the anatomy and function of the knee joint
- Recognize chronic injuries and pain syndromes to the foot and ankle



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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 16 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 16 *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 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 (AAFP)

Application for CME credit has been filed with the American Academy of Family Physicians. Determination of credit is pending.

American Osteopathic Association (AOA)

These programs are approved for 16 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 16 hours of ACEP Category I credit.

Canadian Physicians

The American Academy of Family Physicians (AAFP) and the College of Family Physicians of Canada (CFPC) have a bilateral reciprocal certification agreement whereby: CME/CPD activities held across the Canada - U.S. border are certified according to the nationality of the primary target audiences regardless of where the providers are located. The activities will be reviewed according to the criteria of the certifying organization.

Nursing Credit Designation

American Nurses Credentialing Center (ANCC)

Medical Education Resources designates this live activity for a maximum of 16 ANCC nursing contact hours. Nurses will be awarded contact hours upon successful completion of the activity.

This activity is designated for 6.0 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 16 contact hours.

Physician Associates Credit Designation

American Academy of Physician Associates (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 16 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 16 contact hours (1.6 CEUs) of the Accreditation Council for Pharmacy Education.

Universal Program Number: JA0003680-0000-25-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.