



**INTERNAL MEDICINE FOR PRIMARY CARE:
ADDICTION/DERMATOLOGY/GERIATRICS/
OPHTHALMOLOGY**

**Paris, France - Paris Marriott Opera Ambassador Hotel
May 19 - 22, 2025**



Monday, May 19, 2025

7:00 am

Registration

Rooms booked as part of the MER room block include breakfast in the hotel dining room. Participants booked outside of the MER room block, please make breakfast arrangements on your own.

7:30 am - 8:30 am - Dermatology

Dermatitis

Overview of the causes and forms of skin irritants; Contact, atopic, irritant, nummular, seborrheic and exfoliative; Treatment of blistering, oozing, crusting and flaking; Diagnostic principles and management strategies

8:30 am - 9:30 am - Dermatology

Papulosquamous Diseases

Diagnostic principles of skin lesions consisting of red or purple papules; Psoriasis, lichen planus, pityriasis rosea, lupus erythematosus; Discussion of how to tell one scaly rash from another

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - Dermatology

Bacterial Infections of the Skin

Impetigo, ecthyma, folliculitis, furunculosis, necrotizing fasciitis, Lyme disease, syphilis; diagnosis and management; Guidelines for antibiotic treatment; Management of special populations

10:40 am - 11:40 am - Addiction

Substance Use and Addiction: Screening and Brief Intervention

Essential information and skills needed for identifying substance use concerns; Epidemiology, screening tools and the stages of change; Practical steps for initial intervention in the primary care setting

11:40 am - 12:40 pm - Addiction

Addiction Psychopharmacology for Alcohol Use Disorder

The scope of alcohol related problems and the societal burden of Alcohol Use Disorder; Overview of FDA-approved as well as pertinent off-label pharmacotherapies for Alcohol Use Disorder

12:40 pm

Session Adjourns



Tuesday, May 20, 2025

7:00 am

Registration

Rooms booked as part of the MER room block include breakfast in the hotel dining room. Participants booked outside of the MER room block, please make breakfast arrangements on your own.

7:30 am - 8:30 am - Addiction

Substance Use and Addiction: Diagnosis and Treatment

Definition of addiction and its neurobiological basis; Examination of the diagnosis of substance use disorder and ASAM's multidimensional assessment; Treatment and relapse challenges; The use of motivational interviewing

8:30 am - 9:30 am - Addiction

Addiction Psychopharmacology for Opioid Use Disorder

Opioid crisis update; Assessing risk factors for opioid overdose; FDA approved medication for treating overdose; FDA approved medication assisted treatment options for managing opioid addiction

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - Dermatology

Skin Manifestations of Systemic Disease

Skin will often reflect signs of systemic diseases, be useful for diagnosis, or suffer from a complication of disease or its treatment; Diagnosis of rheumatologic, endocrine, gastrointestinal, and psychologic conditions based on cutaneous findings

10:40 am - 11:40 am - Geriatrics

Approach to the Geriatric Patient

The demographics of aging and the physiologic changes in the elderly patient; Medication use in the elderly including changes in age-related pharmacokinetics and pharmacodynamics and medication adherence; Review of risky medications often used in elderly patients

11:40 am - 12:40 pm - Geriatrics

Depression: Considerations in Older Adults

Overview of depression as a common condition often seen in primary care; The many ways depression negatively impacts other healthcare issues; Simple methods of recognition and managing depression in the primary care setting that can greatly improve the comfort, function, and the quality of life for older adults

12:40 pm

Session Adjourns

Wednesday, May 21, 2025

7:00 am

Registration

Rooms booked as part of the MER room block include breakfast in the hotel dining room. Participants booked outside of the MER room block, please make breakfast arrangements on your own.

7:30 am - 8:30 am - 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

8:30 am - 9:30 am - Geriatrics

Urological Disorders in the Older Adult

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 - Ophthalmology

Blurred Vision

Blurred vision is a common problem seen in primary care and the emergency room. Lecture will develop an algorithm to evaluate, triage and treat these patients. When should someone with a complaint of blurred vision be sent to an ophthalmologist? When should an imaging study be done? What could be causing this problem in the first place? Lecture will address these questions and others.

10:40 am - 11:40 am - Ophthalmology

Approach to the Aging Eye

Differentiation between "normal" aging process and the "diseases" of ocular aging; Highlighting of the most common issues facing the aging population with respect to ophthalmology: macular degeneration, diabetes and glaucoma

11:40 am

Session Adjourns



Thursday, May 22, 2025

7:00 am

Registration

Rooms booked as part of the MER room block include breakfast in the hotel dining room. Participants booked outside of the MER room block, please make breakfast arrangements on your own.

7:30 am - 8:30 am - Ophthalmology

Dry Eye

The role of age, hormone levels and environmental factors in producing dry eyes; Differentiating and understanding triggers of dry eye disease; The ocular role in photophobia and migraine; Overview of treatment options

8:30 am - 9:30 am - Ophthalmology

A Primary Care Primer on Ophthalmic Emergencies

Decreased vision, eye pain, red eye: what is an emergency in ophthalmology? Discussion of evaluation and management of these complaints in a primary care setting

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:

- Differentiate between the presentations and causes of atopic, contact (irritant and allergic), and nummular dermatitis
- Discriminate the diagnostic principles and treatment options for papulosquamous diseases with red, raised bumps
- Perform a differential diagnosis of common bacterial skin infections and recommend appropriate treatment
- Identify cutaneous findings that serve as surrogates of internal diseases
- Describe strategies for identifying and treating substance use disorders
- Develop a treatment plan for Alcohol Use Disorder
- Recognize the basic biological, behavioral, and social factors that underly the mechanisms of drug abuse risk and other related problems
- Identify therapies, including nonpharmacological pain treatment strategies, that can reduce the dose of opioids to control pain
- Utilize a comprehensive geriatric assessment to identify potential issues in the elderly patient
- Recognize and manage geriatric depression
- Diagnose and treat cognitive impairment, dementias, and Alzheimer's disease
- Describe the primary care work-up of incontinence in older adults
- Identify common causes of blurred vision
- Discuss a comprehensive approach to eye and vision management in the aging patient
- Discuss a comprehensive approach to the patient with dry eyes and a red eye seen in primary care
- List treatment options for patients with ophthalmic emergencies, as well as those with circulatory complications



Disclosure of Relevant Financial Relationships

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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.