



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

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**INTERNAL MEDICINE FOR PRIMARY CARE:  
EMERGENCY/GASTROENTEROLOGY/  
PULMONOLOGY**

**Jackson Hole, WY - Hotel Terra  
March 20 - 22, 2026**

Friday, March 20, 2026

7:00 am

**Check-In and Breakfast**

7:30 am - 8:30 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

8:30 am - 9:30 am - 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

9:30 am - 9:40 am

**Coffee Break**

9:40 am - 10:40 am - Pulmonology

**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

10:40 am - 11:40 am - Gastroenterology

**Hepatitis B and C Viruses: Review for the Primary Care Clinician**

Hepatitis C virus: Review of background, screening recommendations, and treatment by the primary care provider; Hepatitis B virus: Review HBV screening, interpretation of testing, vaccinations guidelines and impact, and indications for treatment including for special populations

11:40 am - 12:40 pm - Gastroenterology

**Abnormal Liver "Function" Tests & Drug Induced Liver Injury (DILI)**

Elevation of elevated LFT's are a common problem, but how should we interpret them? How much testing is necessary and when to refer? Review of indications for referral and liver biopsy; Drug-induced liver injury (DILI) will be reviewed including resources to help evaluate

12:40 pm

**Session Adjourns**

**Saturday, March 21, 2026**

**7:00 am**

**Arrival and Breakfast**

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

**Non-alcoholic Fatty Liver Disease: A New Name and Common Problem**

Review of new nomenclature and definitions of non-alcoholic fatty liver disease (MASLD); Discussion of screening, available diagnostic testing, indications for liver biopsy, and risks associated with the disease; Discussion of newly available and future treatments for MASLD/MASH

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

**Cirrhosis and Indications for Liver Transplantation**

Overall review of several of the potentially lethal complications of portal hypertension and end-stage liver disease including varices, hepatic encephalopathy and ascites; Review the role of liver transplantation, including indications for referral to a transplant center and contraindications to transplant; Review of the transplant selection process, including for patients with alcoholic cirrhosis

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

**Coffee Break**

**9:40 am - 10:40 am - Pulmonology**

**Lung Cancer Screening & 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

**10:40 am - 11:40 am - Emergency Med**

**Approach to the Patient Who Becomes Unstable in the Office**

Some patients come to the clinic and become unstable. What needs to be done prior to arrival of the ambulance. This course discusses the evaluation and treatment of unstable patient, initial resuscitation and transfer process.

**11:40 am - 12:40 pm - Emergency Med**

**Common Office-Based Emergencies**

Office-based evaluation of shortness of breath, chest pains, abdominal pain, syncope, seizure and endocrine related problems. Criteria for transfer to an emergency department will also be discussed.

**12:40 pm**

**Session Adjourns**



**Sunday, March 22, 2026**

**7:00 am**

**Arrival and Breakfast**

**7:30 am - 8:30 am - Emergency Med**

**Psychiatric Emergencies in Primary Care**

Most patients with a mental illness come to the office for evaluation and treatment of their complaint. This presentation will review those common psychiatric conditions including depression, anxiety, and substance use disorder. Suicide risk assessment is essential to this evaluation process.

**8:30 am - 9:30 am - Emergency Med**

**Toxicology Emergencies Commonly Seen in the Office**

Patients may walk into the clinic who have taken a toxic substance or drug overdose. It is important to do a detailed history, look for physical clues and determine if the patient has a toxidrome. The presentation will aid in determining who needs to go to emergency room and who can be treated in the office.

**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:

- Diagnose and manage patients with asthma
- Design treatment strategies reflective of current evidence-based medicine for common respiratory infections
- Describe the current therapeutic management of COPD
- Discuss diagnosis and screening strategies as well as treatment plans for lung nodules and lung cancer
- List current treatment recommendations for HBV and HCV
- Describe needed testing for elevated liver function tests
- Recognize when to refer a patient for liver biopsy
- List indications for referral to liver transplant
- Evaluate a patient who becomes unstable in the office and prepare for transport via ambulance
- Recognize when common complaints such as abdominal pain require urgent referral to the emergency department
- Discuss the importance of suicide risk assessment in patients presenting with psychiatric emergencies
- Utilize history and physical exam to determine if a patient has a toxidrome

### **Disclosure of Relevant Financial Relationships**

Medical Education Resources ensures balance, independence, objectivity, and scientific rigor in all our educational activities. In accordance with this policy, MER identifies financial relationships with its instructors, content managers, and other individuals who are in a position to control the content of an activity. All relevant financial relationships have been 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 healthcare, and not the business interests of an ineligible company.

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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)

AAFP has reviewed Internal Medicine for Primary Care: Emergency/Gastro/Pulm and deemed it acceptable for up to 12.00 Live AAFP Prescribed credit(s). Term of approval is from 3/20/2026 to 3/22/2026. Physicians should claim only 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 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 12 ANCC nursing contact hours. Nurses will be awarded contact hours upon successful completion of the activity.

This activity is designated for 5.25 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 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 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: JA0003680-0000-26-027-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.