INTERNAL MEDICINE FOR PRIMARY CARE: CARDIOLOGY/ENDOCRINOLOGY/NEPHROLOGY

Laguna Beach, CA - The Ritz-Carlton, Laguna Niguel
September 18 - 20, 2026

Friday, September 18, 2026

7:00 am

Check-In and Breakfast

7:30 am - 8:30 am - **Endocrinology**
Disorders of Calcium Metabolism
Review of calcium homeostasis; causes of hypercalcemia; diagnosis and treatment

8:30 am - 9:30 am - **Endocrinology**
Metabolic Bone Disease
Disorders of bone strength caused by abnormalities of minerals, vitamin D, bone mass and structure; The role of calcium and phosphorus; Osteomalacia, Paget's disease and parathyroid disorders

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - **Endocrinology**
Osteoporosis
Review the epidemiology and pathophysiology of osteoporosis along with interpretation of DEXA scans and FRAX risk assessment; up-to-date therapeutic options

10:40 am - 11:40 am - **Nephrology**
Should All Patients with CKD be on SGLT2 Inhibitors?
Sodium-glucose transporter 2 inhibitors (SGLT2i) represent a major advance in the treatment of patients with diabetes in kidney disease when added onto renin-angiotensin system blocking drugs. Increasing evidence indicates that this class of drugs provides both kidney and cardiovascular benefits to patients with chronic kidney disease, regardless of diabetes status. Primary care providers need to know which patients should be prescribed these drugs as they clearly not only reduce morbidity but also mortality in CKD patients with or without diabetes. This lecture will provide the most up to date use of SGLT2i in patients with CKD, including evidence-based guidelines/goal directed medical therapy.

11:40 am - 12:40 pm - **Nephrology**
Glomerulonephritis 101
Glomerulonephritis is an important cause of chronic progressive kidney disease and can be difficult to detect and diagnose. This case based lecture will provide primary care providers with the knowledge and tools on when to suspect glomerulonephritis, how to differentiate from other causes of kidney disease. IgA nephrology, the most common cause of glomerulonephritis, will be discussed as an example of differentiating glomerulonephritides and participants will learn about the mechanisms of action and how to prescribe three FDA approved treatments for patients with this particular glomerular disease.

12:40 pm

Session Adjourns

Saturday, September 19, 2026

7:00 am

Arrival and Breakfast

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

Managing Diabetic Kidney Disease: New Insights and Therapies

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 chronic kidney disease and review recently completed and ongoing clinical trials designed to improve kidney outcomes. The lecture will also discuss when and how to use non-steroidal mineralocorticoid receptor antagonists and Glucagon-like peptide-1 (GLP-1) agonists in clinical practice.

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

Primary Care Primer on Electrolytes

Electrolyte and acid-base disorders are common findings in clinical practice. They can arise from genetic and acquired diseases and can be associated with commonly prescribed medications. This case-based lecture focuses on the disturbances in and interactions between serum sodium, potassium, and bicarbonate. It reviews the pathophysiology, diagnosis and management of these common imbalances.

9:30 am - 9:40 am

Coffee Break

9:40 am - 10:40 am - **Endocrinology**

Endocrinology Cases: Calcium Disorders and Osteoporosis

Challenging case presentations in calcium disorders and osteoporosis

10:40 am - 11:40 am - **Cardiology**

Primary Prevention of Cardiometabolic CVD

Definitions; AHA/ACC and other lipid guidelines updates; HDL Cholesterol: The good cholesterol?; Metabolic syndrome and/or obesity; Who needs treatment and how much; The role of lifestyle changes, exercise and cardiac rehabilitation; Drug therapy updates; Risk calculation; Role of pooled equations for risk estimates

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

Work-up of Patients with Suspected CAD

Risk factor evaluation and risk assessment models; 2021 ACC/AHA Chest Pain Guidelines; Test selection including ECG, echo, nuclear and newer imaging modalities (including discussion of appropriate use criteria--AUC); The usefulness of CT scanning; The role of bio markers and EBCT; Suspected CAD in special populations (women, diabetics, the elderly)

12:40 pm

Session Adjourns

Sunday, September 20, 2026

7:00 am

Arrival 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 (HFrEF) and heart failure with preserved EF (HFpEF); Determining patients for referral using biomarkers, eg NT Pro BNP; Treatment options: ACE inhibitors, ARBs, ARNI, beta blockers, mineralocorticoid receptor antagonists, SGLT2i; The role of devices (ICD and/or CRT) in treatment and antiplatelet drugs; Issues related to the hospitalized patient with acute decompensated heart failure and readmissions

8:30 am - 9:30 am - **Cardiology**

Arrhythmias

Types and symptoms of arrhythmias; Approach to the patient: when to treat, when to refer, when to admit; Evaluation of the patient with palpitations; Atrial fibrilation: the use of anticoagulants indications, CVA risk scores, warfarin vs newer oral anticoagulants, controlling heart rate vs rhythm; Ventricular and other arrhythmias: when are they serious

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:

- Discuss current diagnostic criteria and treatment approaches to disorders of calcium metabolism
- Review the diagnostic criteria and therapeutic approaches to osteoporosis and other calcium related disorders
- Identify the risks and benefits of utilizing bisphosphonates in the treatment of osteoporosis
- Utilize case-based learning to develop treatment plans for calcium disorders
- Describe evidence-based guidelines for the use of SGLT2 inhibitors in patients with CKD
- Describe treatment options for hematuria and glomerulonephritis
- Identify strategies to detect and treat diabetic kidney disease
- Review the pathophysiology, diagnosis, prevention and management of common electrolyte imbalances
- Implement lifestyle changes as well as lipid and cholesterol guidelines for the prevention of CAD
- Describe the work-up, risk assessment and test selection of patients with suspected CAD
- Implement treatment strategies reflective of recent guidelines and current evidence based medicine for heart failure
- Describe current diagnostic and treatment approaches to arrhythmias and atrial fibrilation

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.

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 *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)

ABIM CME MOC ACCREDITED

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: Cardio/Endo/Nephro and deemed it acceptable for up to 12.00 Live AAFP Prescribed credit(s). Term of approval is from 9/18/2026 to 9/20/2026. Physicians should claim only the credit commensurate with the extent of the 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 6.25 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: JA0003680-0000-26-151-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.